



NORTH RIDING OF YORKSHIRE COUNTY COUNCIL

EDUCATION COMMITTEE

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# ANNUAL REPORT

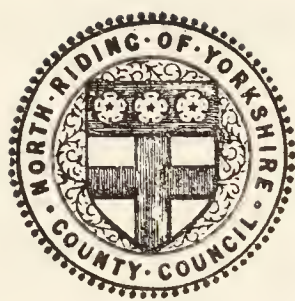
OF THE

**PRINCIPAL SCHOOL MEDICAL OFFICER**

FOR THE YEAR

1959





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## CONTENTS

	<i>Page</i>
BLIND PUPILS	22
CHILD GUIDANCE SERVICE	19
CLINIC SERVICES	46
CLOTHING AND FOOTWEAR	11
CRIPPLED CHILDREN	17
DEAF CHILDREN	23
DELICATE CHILDREN	23
DENTAL SERVICE	38
DIPHTHERIA	31
DIPHTHERIA IMMUNISATION	31
EAR, NOSE AND THROAT DEFECTS AND TREATMENT	13
EYE DEFECTS AND TREATMENT	14
EPILEPTIC CHILDREN	27
GROUP TESTING OF HEARING	13
HANDICAPPED PUPILS	21
HOME VISITING—FOLLOW-UP CASES	11
HYGIENE	37
INFECTIOUS DISEASES	30
INTRODUCTION	4
IMPETIGO	12
MALADJUSTED CHILDREN	28
MEDICAL INSPECTIONS	8
MEDICAL EXAMINATIONS	37
MENTALLY RETARDED CHILDREN	24
MILK IN SCHOOLS	33
MINOR AILMENT CLINICS	12
NEPHRITIS	31
NURSERY SCHOOLS AND CLASSES	37
NUTRITION	9
ORTHOPAEDIC TREATMENT	16
PARTIALLY SIGHTED PUPILS	22
PARTIALLY DEAF PUPILS	23
PHYSICAL EDUCATION	35
POLIOMYELITIS VACCINATION	31
RINGWORM	16
SCABIES	16
SCHOOL MEALS	32
SECTION 57, EDUCATION ACT, 1944	30
SPEECH THERAPY	17
STAFF—LIST OF	5
CHANGE IN	7
STATISTICS—GENERAL	5
TABLES	40
TUBERCULOSIS	32
UNCLEANLINESS	10
WATER SUPPLIES	37



## INTRODUCTION

To the Members of the North Riding Education Committee.

MR. CHAIRMAN, MY LORD, LADIES AND GENTLEMEN,

I have pleasure in submitting my annual report as Principal School Medical Officer for the calendar year 1959.

Last year I drew attention to the need for a revision of policy of the Whitley Councils. I have again mentioned this problem this year because the unsatisfactory state of affairs persists and in some cases has deteriorated. Other matters which urgently need national solution and which are mentioned in this report are certain weaknesses in the collection of statistics, the need for powers to eliminate the sources of louse infestation and steps to prevent the unnecessary prescription of spectacles.

In the section concerned with handicapped children I have been able to welcome an expansion of the provision of special classes in ordinary schools for certain educationally subnormal children.

As the report deals with epidemiological matters directly affecting the health of children, I have drawn attention to a further deterioration in the diphtheria immunity index which is a rough measure of the state of protection enjoyed by the school population. I have also recorded further outbreaks of a nose and throat infection which affects the kidneys and which can, if not adequately and promptly treated, cause life-long invalidism.

In the section on tuberculosis there is a short description of a breakdown in safety of a school milk supply. The main lesson learned as a result of the investigations of this breakdown is that in those cases where raw T.T. milk is consumed, it is not yet time to cut down controls on the purity of milk supplies; any such relaxation, which is the present national policy, is in my opinion premature.

In conclusion I should like to report my appreciation of the loyal assistance given to me by all those employed in the school health service. I am particularly grateful to my deputy Dr. George, who drafted this report and to Mr. Mathison, the senior clerk in the school health section, for his assiduity in preparing the tables and collecting other material for this report. I also desire to acknowledge the co-operation and assistance of many head teachers and the help given by the staff of the Education Department.

J. A. FRASER,

Principal School Medical Officer.

County Hall,

Northallerton.

31st December, 1960.

## GENERAL STATISTICS

The Education Committee is responsible for primary and secondary education throughout the administrative county but certain functions relating to primary and secondary education are exercised by the Scarborough Divisional Executive in the area of that division which consists of the municipal borough of Scarborough, the urban district of Scalby, and the rural district of Scarborough. Subject to the general direction of the Committee, the school health service in the Scarborough division is administered by the divisional executive.

Population in the administrative county (mid year 1959)	....	390,800
Children on registers of primary schools, January, 1960	....	37,069
Primary schools or departments, January, 1960	....	338
Children on registers of secondary schools, January, 1960	....	21,047
Secondary schools, January, 1960	....	57

## SCHOOL HEALTH SERVICE STAFF at 31-12-59

### MEDICAL

#### *Principal School Medical Officer*

\*J. A. FRASER, M.B., CH.B., D.P.H.

#### *Deputy Principal School Medical Officer*

\*J. T. A. GEORGE, M.D., CH.B., D.P.H.

#### *Medical Officer of Health and Divisional School Medical Officer*

\*W. G. EVANS, M.A., M.B., B.CHIR., D.P.H.

#### *School Medical Officers*

\*ELIZABETH R. CAMERON, M.B., CH.B., D.P.H.

ELIZABETH D. ELLISON, B.A., CH.B.

(temporary part-time).

S. E. JACKSON, M.B., CH.B.

(temporary part-time).

\*MARGARET D. CAIRNS, M.B., CH.B., D.P.H.

\*NOEL HAY, M.B., B.CH., B.A.O.

\*L. A. NETTLETON, M.B., CH.B., D.P.H.

\*MAVIS B. TAYLOR, M.R.C.S., L.R.C.P.

MARY TIMPERLEY, M.B., CH.B.

\*P. BRODBIN, L.R.C.P. & S.I., D.P.H.

(Commenced 1/1/60)

\*J. L. COTTON, M.B., CH.B., D.P.H.

\*W. R. M. COUPER, M.B., CH.B., D.P.H.

\*J. A. DUNLOP, M.B., CH.B., D.P.H.

\*F. W. GAVIN, M.D., CH.B., D.P.H.

\*H. GRAY, M.D., CH.B., D.P.H.

\*D. H. S. GRIFFITH, L.R.C.P. & S., L.R.F.P.S.,  
D.P.H. (Resigned 20/6/59)

\*J. MCGOVERN, M.B., CH.B., D.P.H.

\*H. PATTINSON, M.B., CH.B., D.P.H.

\*B. SCHROEDER, M.B., CH.B., D.P.H.

\*Approved by the Ministry of Education for the ascertainment of educationally subnormal children.

Scarborough  
Divisional  
Executive

Also District  
Medical Officers  
of Health, and  
Assistant County  
Medical Officers



## Part-time Specialist Officers

*Aural Surgeon* F. FLEMING, M.B., B.S., D.L.O.

*Psychiatrist* L. W. ROBINSON, M.B., CH.B., D.P.M.

### *Dental Anaesthetists*

R. D. BELL, M.B., CH.B. (Commenced 5/1/59)

S. J. HALKETT, L.R.C.S., L.R.C.P.

R. M. MACKENZIE, M.B., B.S.

R. W. RUTTER, M.B., CH.B.

E. HOLDEN, M.R.C.S., L.R.C.P.

In addition the two Regional Hospital Boards at Newcastle and Leeds provide the part-time services of ophthalmic surgeons, orthopaedic surgeons, and aural surgeons, and in the case of the Leeds Board, one psychiatrist without charge to the Authority.

## DENTAL

### *Principal School Dental Officer*

I. J. FAULDS, L.D.S.

### *School Dental Officers*

D. BEWES ATKINSON, L.D.S. (part-time).

J. L. BIRKETT, B.D.S. (part-time, resigned 30/9/59).

K. CALDER, L.D.S. (part-time, commenced 2/4/59).

MRS. P. CASARTELLI, B.D.S. (part-time)

A. D. CLARK, L.D.S.

D. A. CLOUGH, L.D.S.

MISS S. R. CUMMINS, B.D.S.

MISS L. ETHERINGTON, B.D.S. (Resigned 14/2/59).

G. FLEMING, L.D.S. (part-time).

F. D. GODSMARK, L.D.S.

L. H. HEAD, L.D.S.

H. C. MORGAN, L.D.S. (part-time).

J. I. MUNRO, L.D.S. (part-time, commenced 27/4/59).

C. E. PLACE, L.D.S.

R. B. STEEL, L.D.S.

MISS J. H. SUTTIE, L.D.S.

MRS. G. R. WIGIN, L.D.S. (part-time, commenced 17/6/59).

### *Dental Technicians*

R. G. HANSOM (Senior Technician, Surgical).

R. MITCHESON (Technician in charge).

F. SHAW (part-time, resigned 4/7/59).

I. R. MILNES (Apprentice).

*Dental Attendants*—13 full time, 2 part-time.

## NURSING

### *Superintendent School Nurse*

MISS M. N. BRANDISH, S.R.N., S.C.M., H.V. CERT. (Commenced 1/4/59).



*Deputy Superintendent School Nurse*

MISS E. CHAPMAN, S.R.N., S.C.M., M.T.D., H.V. CERT.  
(Commenced 7/7/59).

*School Nurses*

34 Health Visitor/School Nurses (half-time).

3 School Nurses (full-time).

A school nursing service equivalent to that of a further 5 full-time nurses is given by district nurses or combined-duty nurses in the rural areas.

*Orthopaedic Nurses*

C. CHAPMAN, S.R.N.

B. D. ROWELL, S.R.N., S.C.M., Orthop. Certif.

*Audiometric Nurse*

E. PRESSICK, S.R.N., S.C.M. (Resigned 30/4/59).

P. FERRIS, S.R.N. (Commenced 1/7/59).

**CHILD GUIDANCE***Educational Psychologist*

MISS E. M. MILBANKE, M.A.

MR. P. F. WOODMAN, B.A., DIP. ED. PSYCH. (Commenced 20/7/59).

*Psychiatric Social Worker*

J. G. HAGGETT.

**SPEECH THERAPY**

MRS. A. R. COWELL, L.C.S.T. (part-time).

MISS M. GOUGH, L.C.S.T. (part-time).

MISS A. MAWSON, L.C.S.T. (Commenced 1/9/59)

MISS E. M. TAYLOR, L.C.S.T. (Commenced 8/6/59).

**ADMINISTRATIVE STAFF**

H. A. ROEBUCK, D.P.A.

B. M. MATHISON.

**STAFF**

In my report for 1958 I had to record a considerable loss of medical time due to illness, a factor which largely nullified an increase in Staff in the previous year. In 1959, I am pleased to be able to report, no such loss occurred, with the result that the service received commensurate benefit. There was some loss, however, following the resignation of Dr. D. H. S. Griffith in June. Experience shows that a period of six months or more may easily elapse before it is possible suitably to fill a vacancy in the medical staff, and such an interval occurred before Dr. P. Brodwin, whom I now welcome, was able to assume his appointment in the new year. This delay is due partly to the existence of a somewhat complicated procedure which must necessarily precede an appointment by several employers and partly to the dearth of suitable candidates. Future interregna may well be still more protracted because democratic processes cannot be condensed and because ever fewer doctors are prepared, even if their interest lies in preventive medicine, to accept the poor prospects offered by the Public Health Service.

The Principal School Dental Officer, on page 38, reports the resignation of Mr. J. L. Birkett and Miss L. Etherington and the recruitment of three part-time officers, Mr. K. Calder, Mr. J. I. Munro and Mrs. G. R. Wigin. He is also able to welcome Dr. R. D. Bell, who, as whole-time dental anaesthetist, undertakes services previously given by several part-time consultants. These changes result in the loss to the School Dental Service of some four sessions weekly. Even so, the North Riding is more happily placed than most local authorities in the matter and it is possible to maintain a fair service in nearly all areas of the Riding. The service is, however, necessarily well below that which is desirable, and there is no apparent prospect of an improvement in the staffing position. It has been very many years since there was competition between two or more applicants for appointment as School Dental Officer, and indeed the occasions on which a single application for a whole-time post have been received have been so rare as to stand out as events of unusual interest.

The reasons for this unsatisfactory state of affairs in both medical and dental spheres are so apparent and have been given before so frequently as to make reiteration unnecessary.

The staffing problem in the Child Guidance Service is slightly different. Here the shortage of suitably qualified and experienced personnel is not related to the existence of more attractive alternative fields of activity but is due to the fact that suitable people are unwilling to undertake training because the ultimate remuneration is inadequate. It is thus virtually impossible in the northern provinces to recruit psychiatric social workers. The position is very slightly easier in regard to educational psychologists, and I am able to welcome Mr. P. F. Woodman who commenced duty for the Authority in July.

## **MEDICAL INSPECTION OF PUPILS**

Regular medical inspection by the school health service staff was carried out in 275 primary and 54 secondary schools and also in the special schools in the Riding. The staff did not inspect those children in the 3 hospital schools which have been the educational responsibility of the Committee since 5th July, 1948.

### **Number of Children Inspected**

Periodic medical inspection was performed on 24,108 school children, an increase of 2,799 compared with the figure for 1958. This 13% increase was due to the increase in medical time available to the service, as outlined earlier.

### **Diseases and Defects**

Some 2,707 of the 24,108 children inspected, rather more than 11% were considered to be suffering from a disease or defect, other than dental diseases or infestation with vermin, requiring treatment. This proportion (11.2%) is appreciably higher than the corresponding figure for 1958 (8.7%) and the increased proportion was noted in all age groups of 5 years and above as in demonstrated in the following table:—



Age Groups Inspected (by year of birth)	Number of Pupils	
	Inspected	Found to require treatment (excluding dental diseases and infestation with vermin)
1955 and later	150	9 (6.00%)
1954	2,606	279 (10.71%)
1953	2,615	293 (11.20%)
1952	1,602	221 (13.80%)
1951	2,864	318 (11.10%)
1950	1,302	131 (10.06%)
1949	1,169	161 (13.77%)
1948	1,495	201 (13.44%)
1947	2,758	275 (9.97%)
1946	2,435	250 (10.27%)
1945	1,824	227 (12.45%)
1944 and earlier	3,288	342 (10.40%)
Total	24,108	2707 (11.23%)

Further details are given in Part I, Table A, and Part II, Table A.

There was again an increase in the number of special inspections and reinspections in the Riding, 15,349 in 1959 as against 14,603 in 1958 and 9,609 in 1957. This year's increase, unlike that of 1958, is real, for the method of compiling the statistics has been the same as in 1958, but as I have stated before, the aggregate numbers in no way indicate the amount of time spent on the work.

### GENERAL CONDITION

The following table records the proportions of school children medically inspected whose general condition and state of nutrition was considered to be "satisfactory" or "unsatisfactory."

Year	Number of Pupils Inspected	A Good %	B Fair %	C Poor %
1949	23,467	38.89	59.19	1.92
1950	23,593	48.61	49.90	1.49
1951	23,507	51.31	47.65	1.04
1952	24,059	54.66	44.32	1.02
1953	22,423	54.67	44.17	1.16
1954	23,723	56.70	42.59	.71
1955	24,173	58.33	41.14	.53
1956	20,341	—	satisfactory 99.19	unsatisfactory .81
1957	26,202	—	99.56	.44
1958	21,309	—	99.45	.55
1959	24,108	—	99.54	.46

This table is again published notwithstanding the fact that the classification of children into two arbitrary groups, on subjective evidence is a valueless procedure. Last year attention was drawn to the fact that these figures are required for a Ministry of Education statistical return and ultimately become embodied in national totals which are as meaningless as the local aggregates from which they are drawn. It was suggested that serious consideration should be given to the abandonment of all numerical returns lacking objectivity, and that plea is iterated.

### Cleanliness

Cleanliness inspections are normally performed by the school nurses and, in 1959, 161,528 such examinations were made, 2,948 more than in 1958. Children found to be harbouring lice or nits numbered in all 2,434, an increase of 291 over 1958. Thus, while there was a 3 per cent increase in the number of cleanliness inspections performed, there was a 14 per cent increase in the number of children found to be infested. This unwelcome deterioration in the situation follows, moreover, a comparable experience in 1958 when there was also a substantial rise.

In the two years 1958 and 1959 the infestation rate has increased by approximately 50 per cent, and that is a trend which is as unfortunate as it is unexpected. It is true that even at the inflated level of 1959 only some 4 per cent of school children were involved, but, in an era of rising living standards, improved health and social services, it is disturbing that such a trend should occur. Furthermore, it should not be overlooked that infestation is relatively uncommon in boys, so it may safely be assumed that the infestation rate in girls approached 8 per cent, or that one girl in every twelve or thirteen was infested. Many of those found to be infested were, as is usually the case, old offenders, but many were not.

There was a slight rise in the number of schools in which no nits or lice were found, the figures for 1957, 1958 and 1959 being 213, 175 and 193 respectively.

### Incidence of Verminous Conditions in Schools, 1959

Percentage of Children Infested			No. of Schools
Nil	....	....	193
Under 1%	....	....	17
1—1.99	....	....	37
2—2.99	....	....	29
3—3.99	....	....	16
4—4.99	....	....	12
5—9.99	....	....	44
10—20	....	....	35
Over 20	....	....	12



While 18 more schools were found to be free from infestation, however, there was again an increase in the numbers of schools with a relatively high proportion of children affected. Thus 12, instead of 10 schools had an infestation rate of over 20 per cent, and 35, instead of 33, had a rate between 10 and 20 per cent.

It was found necessary in 1957, 1958 and 1959 to issue 14, 16 and 29 cleansing notices respectively.

Infestation rates are notoriously highest in urban industrial areas and the North Riding is no exception to this rule: well over half of the population of the County, however, cannot be considered to inhabit industrial areas.

It is reliably claimed that school children receive their lice from their mothers and elder sisters whose inviolable coiffures are only at infrequent intervals discouraged by soap and water from becoming breeding grounds for the vermin. It would seem that an improved standard of living alone cannot banish the louse and that only compulsory disinfestation of child and contacts — or some equally severe measure — will be necessary if the schools are to be louse and nit free.

### **Clothing and Footwear**

Children nowadays are only rarely presented for medical examination inadequately clad, and unheralded visits to schools confirm the general impression that poor clothing is infrequent.

The position in regard to footwear is, however, less happy. Several medical officers have again commented on the frequency with which acquired defects of the foot are seen, particularly in the older child. Parents must be held responsible for allowing their children to wear shoes and stockings (and even wellington boots) which are small and they must share, with certain sections of the boot and shoe trade, the responsibility for the entirely unsuitable foot gear so often seen in schools. It is heartening, however, to be able to record that several shoe manufacturers are selling really satisfactory shoes which they endeavour to ensure are properly fitted; it remains a parental duty to buy only a sound article. If this is done the feet of the young will be protected from abuse until that time in older adolescence when vanity, fashion and stupidity combine to give pain and pleasure in varying degree.

### **Following-up**

If full benefit of the system of medical inspection and treatment of school children is to be gained, it is important that an effective follow-up scheme should be conducted. The school nurses attend inspections in schools and later visit the homes of those children who would benefit from further supervision. These visits naturally take a good deal of time and hence this valuable scheme is readily affected by the availability of school nurses. In 1959, some 3,543 home visits were made as against 3,440 in 1958.

## TREATMENT OF DEFECTS

### Minor Ailments

School clinic sessions were held daily at Pickering and Scarborough, three times weekly at Whitby, Grangetown, New Earswick, twice weekly at Carlin How, Redcar, Thornaby, South Bank and Clifton Without, and once weekly at Lingdale, Guisborough, New Skelton, Easingwold, Loftus, Brotton and Saltburn. As well as being used for the supervision and treatment of relatively trivial conditions, the clinics provide suitable centres at which the school medical officers are available for consultation by parents or teachers. Examinations of various kinds are carried out in the clinics which are an important part of the school health service: more and more of the time of the staff at these clinics is given to assessment of handicaps and other special examinations.

The conditions for which the children attended, and the number of visits and re-visits made were as follows:—

### Attendances at Minor Ailment Clinics

Condition for which children attended the School Clinic				Number of first visits	Number of re-visits
Scabies	....	....	....	9	10
Impetigo	....	....	....	67	86
Ringworm—Head	....	....	....	61	19
Ringworm—Body	....	....	....	17	1
Verminous conditions	....	....	....	359	196
Minor Injuries	....	....	....	909	452
External Eye Disease	....	....	....	100	153
Ear Discharge and Deafness	....	....	....	102	278
Nose and Throat	....	....	....	10	9
Vision	....	....	....	437	35
Lungs	....	....	....	—	—
Nervous System	....	....	....	—	—
Skin (Non-Contagious)	....	....	....	839	766
Sores	....	....	....	446	182
Other conditions	....	....	....	353	259
Heart and Circulation	....	....	....	3	1
Speech	....	....	....	—	—
Diphtheria Immunisation	....	....	....	30	3
Special Examinations	....	....	....	22	6
Total				3,764	2,456



The downward trend observed since the introduction of the National Health Service Act has therefore continued in 1959 as the following table shows:—

Year	Number of First Visits	Number of Re-visits	Total number of Attendances
1949	10,627	14,991	25,618
1950	9,368	11,957	21,325
1951	8,031	10,428	18,459
1952	7,387	10,317	17,704
1953	7,314	8,678	15,992
1954	7,897	8,356	16,253
1955	6,949	6,958	13,907
1956	5,299	5,468	10,767
1957	4,947	3,994	8,941
1958	4,229	2,852	7,081
1959	3,764	2,456	6,220

There is not necessarily any relationship between the number of children attending minor ailment clinics and the number suffering from minor ailments. On the contrary, there is some evidence to show that, while attendances have fallen, the incidence of certain conditions has risen. Thus, infections of the skin have been treated in greater numbers in 1959 than in 1958.

It is presumed that children as well as adults are making progressively greater use of the hospitals and general practitioner services.

### **Diseases of the Ear, Nose and Throat**

In 1952 Miss Pressick, the audiometric nurse, began regularly surveying the school children in the Riding with gramophone and puretone audiometers. During 1959 she resigned her appointment and she was succeeded by Miss Ferris who commenced duty in July.

During 1959 some 6,334 tests were made with the puretone audiometer an instrument which permits an accurate assessment of the degree of hearing loss at different sound frequencies. A total of 169 children failed the test, but many of these were found to have a hearing loss of a temporary nature only, due to impacted wax or to some other easily rectifiable cause. Children having more permanent hearing loss were referred, in collaboration with the family doctor, for specialist advice. Consultants at Darlington, Scarborough and York have co-operated in this way. In the Tees-side area many deaf children were seen by Dr. Fleming at one of

the clinics already mentioned: those requiring admission to hospital or more detailed examination as out-patients were referred by him to the North Riding Infirmary.

Attendances at Dr. Fleming's clinic in 1959 numbered 212. The source and disposal of the 96 new cases (72 new cases in 1958) were as follows:

**Dr. Fleming — New Cases**

Disposal		Source		
		Group test failures	Referred by Medical Officers	Both sources
Referred for Treatment	to hospital	6	11	17
	to minor ailment clinic	23	28	51
Attending own doctor ....		3	2	5
Not requiring treatment ....		10	13	23
Total ....		42	54	96

As in previous years, disease of the ear was a common cause of attendance at minor ailment clinics and the number of first visits made for this reason (102) was exactly the same in 1959 as in 1958. Second visits were, however, more numerous there being 278 in 1959 as against 180 in 1958. There was a further sharp rise in the number of children who received operative treatment for unhealthy tonsils and/or adenoids, the numbers being 195, 305 and 373 in 1957, 1958 and 1959 respectively. A further 26 children were operated upon for other conditions of the ear, nose or throat and, in addition, some 222 received non-operative treatment in hospital or school clinics.

### **Visual Defects and Diseases of the Eye**

Children suspected of having defective eyesight or a squint were again referred in substantial numbers, 2,831 in 1959, to consultant ophthalmologists holding sessions in the Authority's clinics. These sessions were, as previously, organised and administered by the school health service but the specialists were paid by the regional hospital boards. Spectacles were prescribed for about two-thirds of the children examined at the sessions including those who attended on account of squint.



The numbers of children seen by school medical officers in the past 10 years with a suspected defect of vision have been as follows:—

Year	School population	Requiring treatment for vision	Requiring observation only	Total
1950	48,087	1,502	2,523	4,025
1951	49,603	1,656	2,619	4,275
1952	51,420	1,565	2,312	3,877
1953	52,806	1,261	1,503	2,764
1954	53,766	1,512	1,568	3,080
1955	55,051	1,355	1,758	3,113
1956	55,403	1,093	1,160	2,253
1957	55,838	1,558	1,935	3,493
1958	57,439	1,153	1,712	2,865
1959	58,116	1,836	2,607	4,443

Experience this year, when more children have been examined for this purpose than at any time in the past decade, tends to confirm earlier findings. There appears to be no progressive decline in the proportion of the school population with imperfect vision. Indeed, the total of 1,836 children found to require treatment, the highest for many years, represents a significant increase in the proportion of school children examined for suspected defects of vision.

During a similar period the problem in relation to squint has been found to be the same. If standards of case finding, diagnosis and selection for treatment have been constant, squint and defective vision severe enough to require treatment have not significantly declined during the past seven years, although there does appear to be a slight improvement over the position in regard to squint of 10 years ago.

Figures for squint for the past 10 years are as follows:—

Year	School population	Requiring treatment for squint	Requiring observation only	Total
1950	48,087	210	226	436
1951	49,603	231	176	407
1952	51,420	225	199	424
1953	52,806	170	122	292
1954	53,766	155	167	322
1955	55,051	103	170	273
1956	55,403	155	159	314
1957	55,838	150	164	314
1958	57,439	143	169	312
1959	58,116	164	171	335

Children with eye conditions requiring orthoptic or operative treatment are referred to hospital as routine. In addition to those found to have an error of refraction or a squint 100 children were found to have various disorders of the eye and were treated within the school health service.

Two school medical officers have referred in the annual reports of their work to what they regard as the deleterious consequences commonly seen of excessive use of the television set. Dr. Nettleton considers that over-indulgence in this direction can lead to conditions of mild to moderate non-specific chronic conjunctivitis with or without chronic blepharitis. He has observed that these conditions frequently respond to limitation of viewing time.

Yet again the quality, strength and appearance of spectacle frames are adversely criticized by the school medical officers.

Reports have again been received of over zealous and, in some cases, entirely unnecessary prescribing of spectacles by opticians, practices which have repeatedly been condemned by the medical profession but which do not appear to give any anxiety to those people whose function it is to safeguard the financial structure of the National Health Service.

### **Diseases of the Skin**

Of the common transmissible skin diseases, only scabies (31 cases in 1958, 9 in 1959) was observed less frequently. Modest increases in incidence occurred with ring-worm (33 in 1958, 78 in 1959) and impetigo (52 in 1958, 67 in 1959), reference to this has been included elsewhere (page 12).

Dr. Timperley observed during the year an unusually high incidence of skin rashes due to allergy and she has suggested that the surprisingly hot and dry summer may have been a contributing causative factor.

### **Orthopaedic Defects**

Orthopaedic clinics were held regularly in the following places:—

Carlin How	Northallerton	South Bank
Guisborough	Redcar	Thornaby
Kirkbymoorside	Richmond	Whitby
Malton	Saltburn	York (rented from
Normanby	Scarborough	the York Education Committee)

During 1959, 463 sessions were held and 997 children made 3,325 attendances. An orthopaedic surgeon attended at approximately one-quarter (119) of all the clinics, (one-third (135) of the clinics in 1958) and the remainder of the sessions were conducted by one or other of the two orthopaedic nurses employed by the Committee.

Cases treated in the Authority's clinics do not represent the total number of orthopaedic cases in the county. Many are treated in hospital as in-patients and out-patients. Little information is sent to school



medical officers about the children so treated, except in the case of the Adela Shaw Orthopaedic Hospital, Kirkbymoorside. The following table gives information about children treated in 1958 as in-patients at this specialist hospital.

Condition	No. of Children treated
Deformity of feet ....	35
Deformity of leg ....	6
Deformity of hand ....	2
Deformity of neck ....	2
Monoplegia ....	1
Hemiplegia ....	8
Spastic Paraplegia ....	3
Infantile paralysis ....	18
Cerebral palsy ....	7
Congenital dislocation of the hip	1
Old fractures and injuries ....	7
Arthritis ....	1
Schuermans disease ....	1
Perthe's disease ....	2
Dislocated cervical spine ....	1
Coxa Vara ....	2
Scoliosis ....	1
Osteomyelitis ....	1
Fragilitis Ossium ....	1
Tuberculous bones and joints ....	1
Asthma ....	2
Hydrocephalus ....	1
Other conditions ....	9

### Speech Defects

The fluctuating fortune of speech therapy in the Riding took a welcome turn in 1959 when it was possible to recruit a further two full-time therapists. So tolerably adequate cover was again established everywhere except on Tees-side where the need for at least two full-time therapists is acutely felt.

The factual data for the Riding are as follows:—

Total number of treatments ....	1,990
Interviews with parents ....	82
New cases admitted ....	53
Cases re-admitted after absence	27
<hr/>	
Total number of cases admitted....	210
Cases discharged and withdrawn	77
Cases remaining under treatment	133

The reasons for cessation of treatment are as follows:—

		Boys	Girls	Total
Discharged adjusted	} ....	35	21	56
Discharged conditionally				
Left district	....	4	—	4
Left school	....	6	1	7
Poor attendance	....	—	2	2
Refused treatment	....	2	—	2
Further medical investigation		—	—	—
Placed on waiting list	....	2	1	3
		<hr/>	<hr/>	<hr/>
		49	25	74
Remaining under treatment	....	146	62	199
		<hr/>	<hr/>	<hr/>
		195	87	273
		<hr/>	<hr/>	<hr/>

The defects from which these children suffered are given in the following table:—

			Boys	Girls	Total
Stammer	....	....	47	9	56
Dyslalia	....	....	108	41	149
Dyslalia and Stammer	....		—	1	1
Sigmatism	....	....	13	16	29
Cleft Palate	....	....	6	2	8
Cerebral Palsy	....	....	4	6	10
Alalia	....	....	2	2	4
Rhinophonia	....	....	2	1	3
Mongolism and Retardation	....		4	1	5
Facial Paralysis	....	....	1	—	1
Deafness	....	....	—	1	1
Partial Deafness	....	....	1	2	3
Dysphonia	....	....	3	2	5
Dysarthia	....	....	2	—	2
Dyspraxia	....	....	2	—	2
Dyseneia	....	....	1	—	1
Articulatory defect due to teeth malformation	....	....	1	1	2
			<hr/>	<hr/>	<hr/>
			197	85	282
			<hr/>	<hr/>	<hr/>



## THE CHILD GUIDANCE SERVICE

### Report by Miss E. M. Milbanke, Educational Psychologist

Clinics continued to be held this year at Scarborough, Redcar, Clifton, Thornaby, Richmond, Pickering and Thirsk. Dr. C. H. Neville-Smith, consultant in Child Psychiatry to the Leeds Regional Hospital Board, was the medical director to the clinics in the southern part of the county, and Dr. L. W. Robinson in the northern.

A second full-time educational psychologist, Mr. P. F. Woodman, was appointed in July and he worked mainly in the Cleveland and Tees-side area. No corresponding increase in staff was achieved for the social work side of the Child Guidance Service: although the Committee increased the establishment to three psychiatric social workers, it was not possible to fill the vacancies, and Mr. J. G. Haggett remained the only psychiatric social worker.

Altogether 280 new cases were referred this year, 8 of them children who had previously been on the register. Headteachers referred 112, school medical officers 70, family doctors 28, specialists 18, magistrates and probation officers 16, parents 10, the Children's Officer 8, the Secretary for Education 7 and other Child Guidance Services, welfare clinics, health visitors, a clergyman and a speech therapist the remainder.

In a small number of cases the request was for assessment, and 9 of these involved reports being made to the juvenile court. Usually a complaint was mentioned that could be classified under the broad headings shown in the following table.

		Boys	Girls	Total
Anxiety	....	9	11	20
Behaviour Disorder	....	40	17	57
Physical Symptoms	....	16	6	22
Educational Problems	....	90	60	150

At the psychiatric clinics 59 new cases were examined. Table II shows the number in which the action taken was limited to diagnosis and advice, whereas those who had subsequent interviews with the psychiatrist have been added to the treatment list. Some of these were seen for supportive treatment at intervals of about six weeks; some at longer intervals prior to closing or to tide them over until a vacancy occurred for more intensive treatment. With at most 5 psychiatric sessions a week in the North Riding, only very few children could be seen for treatment at weekly intervals.

### Cases seen by Psychiatrist

Clinic	Diagnosis only		Treatment		Total
	Boys	Girls	Boys	Girls	
Scarborough ....	10	5	14	9	38
Clifton ....	7	1	5	1	14
Pickering/Thirsk	5	1	—	—	6
Redcar ....	3	1	9	2	15
Thornaby ....	1	—	7	2	10
Richmond ....	1	1	3	1	6

(Referred to clinics outside North Riding: 2 boys, 5 girls).

At the end of the year 9 children were awaiting initial examination by the psychiatrist at Scarborough, 7 at Redcar, 4 at Thornaby and 2 elsewhere.

In addition to their work in the clinics, the educational psychologists examined 103 boys and 57 girls, and discussed in some detail with their teachers about 40 others whom they did not interview.

The main difference in this year's figures is that the Child Guidance Service was consulted about more than twice as many educational problems as in 1958. It is not surprising that many people have the impression that psychologists deal mainly with backward children, for in about half of these cases (78) the main problem was backwardness in school, and in a further 10 cases the children were too backward to attend school at all. In the course of the year 45 pupils examined were attending or being recommended for special (esn) schools, 16 were considered more suitable for training in an occupation centre, and 10 were kept under observation before a decision could be made about their educability. A survey was made in the Northallerton area of educationally subnormal children in primary schools, and in other areas also pupils were found in need of special educational provision.

Requests for advice were, however, received on a variety of problems in all types of schools. Learning problems, such as a specific disability in one school subject, failure to progress that did not seem due to lack of ability, or the difficulties of pupils suffering from cerebral palsy or sensory handicaps, sometimes required prolonged investigation. The interest and co-operation of the schools concerned was, of course, invaluable.



Total seen by psychiatrist	....	....	....	89	
Total seen by educational psychologist only			....	210	
Total seen by psychologist and P.S.W.	....		....	13	
Total seen by psychiatric social worker only			....	9	
					Boys      Girls
New cases registered in 1959	....	....	....	171	109
Cases open 31/12/59	....	....	....	162	87
Awaiting attention 31/12/59	....	....	....	23	15

## HANDICAPPED CHILDREN

Formal ascertainment and subsequent placing in special schools of handicapped children are duties of the education authority under Section 34 of the Education Act 1944. Ascertainment proceeded inhibited only in rare instances by parental objection, but placing in special schools could only effected in a majority of cases, and then not always promptly. Some reasons for the delay in obtaining places in suitable schools were discussed in the report for 1958 and it is still considered that a proportion, anyway, of the waiting periods could be eliminated by the means suggested in that report.

These delays notwithstanding, fewer children awaited places at the end of 1959 than did so a year earlier. On the 31st January, 1960, 129 children required places in special schools as against 147 on the 31st January, 1959. Of the 129, 116 were classed "educationally subnormal", 44 were awaiting boarding places and 72, day accommodation. Not all these latter 72 children were without special educational treatment, however, because 27 of them received tuition in a separate building which, while not technically a special school, nevertheless served only intellectually retarded children. There was thus an aggregate of 89 retarded children who were not receiving the type of education deemed necessary. The parents of 36 of these children had declined places offered and a further 29 were of an age when special schooling was not considered for one reason or another, to be desirable. Thus, some 24 children, 13 awaiting boarding and 11 day accommodation, were not admitted to special schools because places were not available.

Of those 13 handicapped children who required special schooling but who were not classed as educationally subnormal, three were children whose parents had refused places offered to them. Places were not forthcoming for 10 children, of whom 5 were under five years of age.

Some of those handicapped pupils for whom a satisfactory school cannot be arranged receive home tuition; others have continued in their ordinary schools while receiving as much special attention from their teachers as time has allowed.

The various categories of children requiring special educational treatment, as determined in the Handicapped Pupils and School Health Service Regulations, 1953, are given below and the figures are those for the whole Administrative County as are those elsewhere in this report. The scheme of divisional administration provides that all children in the Scarborough division requiring special educational treatment shall be reported by the Divisional Executive to the County Council.

### Blind Children

At the end of 1959, 11 children had been ascertained to be blind, that is, requiring education by methods not involving the use of sight. Nine children were accommodated in special schools, and two children both under 5 years of age awaited placement. Two new cases were ascertained during the year. At some time during 1959, 10 blind children were receiving education in residential schools:—

School				Boys	Girls
Royal Victoria Blind School, Newcastle-on-Tyne	....	....	....	—	3
Sunshine Home, Overley Hall	....	....	....	—	1
Sunshine Home, Southerndown	....	....	....	2	—
Sunshine Home, Kingswinford	....	....	....	1	—
Wavertree School for the Blind, Liverpool	....	....	....	1	—
Royal Normal College, Shrewsbury	....	....	....	—	1
Condoover Hall, Shrewsbury	....	....	....	—	1
Total				4	6

### Partially Sighted Children

Children who had been ascertained as suffering from serious defects of vision but as being capable of receiving education by special methods involving the use of sight, numbered 10 in December, 1959 and 9 of these were placed in special schools; the unplaced child had parents who had refused consent to admission to a special boarding school. During 1959, at one time or another, eleven children attended special schools as follows:—

School				Boys	Girls
Fulford Road Day School, York	....	....	....	2	—
Exhall Grange, Coventry	....	....	....	6	1
St. Vincents School, West Derby	....	....	....	2	—
Total				10	1



## Deaf Children

At the end of the year 41 children were registered as deaf pupils: these children require educational methods suited to persons without naturally acquired speech; 36 were placed in suitable schools in January, 1960 (14 day, 22 boarding) and 5 awaited placement. Six new cases were ascertained during the year. In all, 37 children were accommodated in special schools in 1959 as below:—

School				Boys	Girls
Northern Counties School, Newcastle	....	....	....	3	1
Yorkshire School for the Deaf, Doncaster	....	....	....	5	8
St. John's School, Boston Spa	....	....	....	—	2
Middlesbrough Day School for the Deaf	....	....	....	6	9
Lawns House School, Leeds	....	....	....	1	1
Mary Hare Grammar School, Newbury	....	....	....	1	—
Total				16	21

## Partially Deaf Children.

Twelve children were ascertained as partially deaf and on the registers in January, 1960. During the year twelve children attended special schools.

School				Boys	Girls
Yorkshire School for the Deaf, Doncaster	....	....	....	—	2
St. John's School, Boston Spa	....	....	....	1	—
Middlesbrough Day School for the Deaf	....	....	....	4	3
Lawns House School, Leeds	....	....	....	1	—
Mary Hare Grammar School, Newbury	....	....	....	—	1
Total				6	6

## Delicate Children.

In general children classed as “delicate” are those for whom special educational treatment would improve health and well-being, but whose disability is of a temporary nature. Two such children, 1 boy and 1 girl, were formally ascertained in 1959 and 10, 6 in day and 4 in boarding

schools, were on the register in January, 1960. The following table includes admissions to and discharges from schools during 1959:—

School	Boys	Girls
Netherside Hall School, Skipton-in-Craven ....	4	—
Fulford Road Day School, York ....	4	2
The Children's Convalescent Home, West Kirby ....	1	1
Salters Lane Open Air School, Darlington ....	—	1
Village Home, Barkingside ....	1	—
St. Vincent's School, St. Leonards-on-Sea ....	—	2
Total ....	10	6

### **Educationally Subnormal Children**

Only a minority of those children who by definition, are educationally subnormal require education in a special school. Most are suitable for education by special methods in ordinary schools. Furthermore only a small proportion of those requiring special school provision are ideally placed in a residential school. As was indicated in the previous report, the opening of the authority's day schools for educationally subnormal children, Eston Lowfields School in 1956 and Kirkleatham Hall School in 1958, each with a 100 places, profoundly eased the pressure previously existing on residential accommodation at Brompton Hall, near Scarborough. By the end of 1959 it was becoming increasingly clear that, if a further 100 special school places, 50 residential and 50 day, could be provided and special class provision in the ordinary schools could be expanded, there would soon be few educationally subnormal children in the Riding not receiving an education of election.

To assist in the establishment of more special classes in ordinary schools, special surveys in the Northallerton and Whitby districts were made by the authority's educational psychologists.

During 1959, some 41 boys and 26 girls were formally ascertained as being educationally subnormal. A considerably larger number of children was given the time-consuming examination which necessarily precedes formal ascertainment.

At the end of January, 1960, 292 children (99 boarders, 191 day pupils and 2 home tuition cases) were receiving special educational treatment otherwise than in special classes in ordinary schools (262 in January, 1959) and 116 (see p. 21, under "Handicapped Children")



were awaiting places in special schools. Some 325 North Riding children attended special schools at some time or another during 1959 as follows:—

School	Boys	Girls
Brompton Hall	65	36
Kirkleatham Hall, Redcar	47	32
Lowfields School, Eston	70	49
Aldwark Manor, Aldwark	1	—
Croome Court, Worcester	2	—
Fulford Road Special Day School, York	6	8
Ian Tetley School, Killinghall	1	1
Allerton Priory R.C. School, Woolton	—	2
Hatchford Park School, Cobham	1	—
Garvald, West Linton, Peeblesshire	—	1
Greenwood School, Halstead	—	1
Etton Pasture School, East Riding	1	1
Total	194	131

### Brompton Hall Residential Special School

Brompton Hall is the Authority's residential special school for educationally subnormal children and has places for 94 children of both sexes. As in the past, pressure was greater on places for boys, notwithstanding the fact that more places are provided for them than for girls. The teaching staff have special experience of teaching educationally subnormal children who receive their education in small, specially selected classes. Children with this particular handicap are much happier in the environment provided by a school such as Brompton Hall where they live with others of a similar intellectual capacity and where they do not have to compete with average children who are so much brighter than they are.

All the children at the school are on the list of a local medical practitioner. Routine medical inspections are arranged by the school medical officer and in addition the children are examined medically before going home on holiday, as well as on their return. The educational psychologist also examines the children from time to time and assists the school medical staff in the selection of children suitable for admission. Physiotherapy and/or speech therapy were given to the small number of children requiring them by visiting staff from the Scarborough clinic.

I am indebted to Mr. K. G. Barker, Headmaster, for the following report:—



“During the year 17 children were admitted, all from the administrative area of the North Riding, and 18 children left. The analysis of leavers is as follows:—

(a)	Left North Riding area because of parents change of abode	3
(b)	Transferred to Fulford Road (Day) School, York ....	1
(c)	Attained age limit (16 years) ....	14

Those leavers of 16 years of age fared as under:—

(1)	In employment ....	9
(2)	Admitted Whixley Colony ....	1
(3)	Unemployed (unemployable) ....	3
(4)	Left district (no information available) ....	1
		<hr/>
		14
		<hr/>

Routine medical and dental inspections and treatment were carried out by the School Medical and Dental Services, and medical treatment under the National Health Service was given by the local medical practitioner, with whom all the pupils are registered.

Speech and physio-therapy were given to the small number of children requiring such treatment by visiting County Staff — speech therapy being a one-day weekly session.

On the roll at the end of 1959 were 88 children — all resident, 57 boys and 31 girls.”

### **Eston Lowfields Day Special School**

Mr. Jarvis, Headmaster, has kindly supplied the following report for the year 1959:—

“The school provides special education, in small classes, for 100 educationally subnormal children living in the north of the county.

For the first time since Lowfields opened in September, 1956, all places were occupied throughout the year under review. In December 1959 there were 58 boys and 42 girls on roll, these pupils being drawn from the following areas:—

South Bank ....	32	Yarm & District ....	6
Grangetown ....	24	Guisborough & District	2
Eston, Normanby & Teesville	9	Great Ayton & District	3
Thornaby-on-Tees ....	24		

There were 17 new entrants during the year. The 17 leavers were placed as follows:—

Excluded under Section 57		Transferred to other	
(3) Education Act 1944	2	authority (parents moved)	1
Excluded under Section 57		Reached school leaving	
(4) Education Act 1944	1	age (16 years)	.... 13

At the end of 1959, of those leaving school to seek employment, 3 had not been placed in any job.

The appointment in September of a sixth assistant teacher was a pleasing feature of the year for it made possible, amongst other things, the inception of various small remedial groups for the most severely retarded.

The need for the services of a speech therapist was underlined by the fact that, during the Autumn Term, thirteen per cent of the pupils had speech defects of one kind or another."

### Kirkleatham Hall Special School

Mr. K. G. Henson, Headmaster, has kindly supplied the following report for the year 1959:—

"This school which opened in September, 1958, had 77 children aged 8 to 14 years on the roll in January, 1960. Eventually there will be 100 children.

Although the grouping together of educationally subnormal children presents problems, the children are undoubtedly benefiting by being freed from competing against children of higher intelligence, and by having a school building which is in such a beautiful setting.

A most valuable contribution is made by the school medical officers and the psychologists. The lack of a speech therapist in the area is a major handicap as a number of children would benefit more in their general education if a skilled speech therapist were available."

### Epileptic Children.

One North Riding pupil was placed in a residential special school for epileptics in 1959. Two pupils were ascertained during the year. Altogether 5 children attended the following schools:—

School					Boys	Girls
Home for Epileptics, Maghull	....	....	....	....	1	—
Lingfield Hospital School	....	....	....	....	3	—
Sedgwick House School	....	....	....	....	1	—
Total ....					5	—

### Maladjusted Children

Children having emotional instability or psychological disturbance and requiring special educational treatment on this account numbered 5 in January, 1960. Of them, 3 were in boarding special schools, one was in an independent school and one awaited a place in boarding school. In all, during the year, 6 children attended boarding schools as below:—

School					Boys	Girls
Wennington Hall, Hornby	....	....	....	....	3	—
St. Margaret's, Bridgwater	....	....	....	....	1	—
Rudolph Memorial School, Dulwich	....	....	....	....	—	1
Eden Grove School, Bolton	....	....	....	....	1	—
Total					5	1

### Physically Handicapped Children.

Five boys and three girls were ascertained in 1959 as being physically handicapped. In January, 1960, 47 children were on the registers, 39 of them being accommodated in residential special schools and eight receiving home tuition. Children attended the following schools during 1959:—

School					Boys	Girls
Welburn Hall	....	....	....	....	24	17
St. Monica's Hostel, Kingsdown	....	....	....	....	—	1
Holly Bank School, Huddersfield	....	....	....	....	—	1
Percy Hedley School, Newcastle	....	....	....	....	—	1
St. Rose's School, Stroud	....	....	....	....	—	1
Ian Tetley School, Killinghall	....	....	....	....	1	—
Moor House School, Oxted	....	....	....	....	1	—
Total					26	21

### Welburn Hall Special School.

Welburn Hall, the authority's residential school for physically handicapped children, has continued to benefit this and other authorities. There are 80 places at the school and all, or nearly all, are normally occupied. On 1-12-59 there were resident 83 children, 35 from the North Riding and 48 from elsewhere.



It is possible to have more children registered than there are places in the school because, by the nature of their handicap, many physically affected children must spend long periods in orthopaedic hospitals for operative and other therapy.

The following table classifies broadly into groups according to age and disability all children resident during the year under review:—

**Welburn Hall. Defects of Children Attending, 1959.**

Age Range	Orthopaedic Conditions								Medical Conditions					
	Polio-myelitis paralytic		Cere-bral Palsy		Muscu-lar Diseases		Other Con-ditions		Heart		Chest		Other Con-ditions	
	B	G	B	G	B	G	B	G	B	G	B	G	B	G
5—9	1	4	4	4	3	1	4	3	—	3	—	2	4	1
10—16	9	6	6	7	4	3	6	2	4	2	3	2	—	2
Total	10	10	10	11	7	4	10	5	4	5	3	4	4	3

General medical supervision of the children at Welburn is carried out by Dr. T. K. Cooke of Kirkbymoorside and orthopaedic supervision by the surgeons at the Adela Shaw Orthopaedic Hospital where children requiring hospital orthopaedic treatment are admitted. Physiotherapy and speech therapy are provided at the school.

I am indebted to Mr. Hywel Williams, Headmaster, for the following comments:—

“One of the most troublesome types of case in a school of this sort, is that of the incontinent child. Many of these cases are spina bifida with paraplegia.

Three of these children have had ileal bladder operations, with very satisfactory results, in so far as these children are now completely dry. Apart from direct medical benefit, the social significance of this is quite marked, as indeed is the changed outlook of the children concerned, who are now generally more socially acceptable, and are themselves taking a full part in the life of the school.

Considerable success has also been met in the treatment of asthma cases, particularly those resulting from an emotional disturbance, and it may be noted that very few of these children suffer from attacks of asthma whilst at the school.”

## SECTION 57, EDUCATION ACT, 1944

This section requires every Local Education Authority to ascertain those children in their area who having attained the age of two years are suffering from a disability of mind of such a nature or to such an extent as to render them incapable of benefiting from education at school.

Under sub-section 3 of this Section, the Local Education Authority are required, for the purposes of the Mental Deficiency Act, 1913, to report to the Health Committee, any child who by reason of disability of mind, is found to be ineducable in a special school.

Under sub-section 4, it is also specified that a child shall be deemed to be ineducable not only if his disability renders him incapable of receiving education, but also if the disability is such as to render it inexpedient, either in his own interest or in the interests of his fellows, that he should be educated in association with other children.

Sub-section 5 likewise requires the Local Education Authority to report to the Health Committee any child in attendance at a maintained school, or at any special school, who by reason of disability of mind, will require supervision after leaving school.

In all during 1959, 46 children were reported under this Section—24 under sub-section 3 and 1 under sub-section 4 as being ineducable and 21 under sub-section 5 as being in need of supervision after leaving school.

Comparable figures for 1958 were 27 under sub-section 3, 2 under sub-section 4 and 36 under sub-section 5, a total of 65.

## INFECTIOUS DISEASE

Notifications (corrected) of infectious disease during 1959 in North Riding children aged 5—14 years (inclusive) were as follows:—

Scarlet Fever	....	....	163
Whooping Cough	....	....	76
Poliomyelitis—Paralytic	....	....	1
Non-Paralytic	....	....	1
Measles	....	....	2,346
Diphtheria	....	....	—
Dysentery	....	....	77
Meningococcal Infection	....	....	3
Acute Pneumonia	....	....	14
Food Poisoning	....	....	4
Tuberculosis—Respiratory	....	....	6
Meninges & C.N.S.	....	....	—
Other	....	....	7
Acute Encephalitis—Infective	....	....	—
Post-Infective	....	....	—
Erysipelas	....	....	1
Enteric or Typhoid	....	....	—
Paratyphoid	....	....	2



## **Diphtheria**

There was no reported case of diphtheria in the Riding in 1959. Cases did, however, occur elsewhere in the country and in these outbreaks diphtheria demonstrated yet again that it remains a lethal disease.

The risk of death from this preventable disease persists and, as has been stressed so often before, parental failure to secure protection for children by inoculation is inexcusable.

## **Diphtheria Immunisation**

By the end of 1959, 71,192 children out of an estimated population of 92,200 under 15 years had been inoculated against diphtheria at some time or another. These figures include pre-school children and the corresponding figures for school children are 52,287 and 60,800. Some 86% of school children have therefore received preventive injections against diphtheria, although less than half have received their injections within the past five years. In fact, only 22,579 of the 60,800 school children, giving an immunity index of 37.1% for school children, have received recent protection, against indices in 1958 of 38.5%, 1957 of 44.3% and in 1956 of 48.7%. This progressive and unwelcome fall has now reached the stage when more than half of the schoolchildren in the Riding are inadequately protected against diphtheria and a further 14% are entirely unprotected.

## **Poliomyelitis**

In 1959, one case of paralytic and one of non-paralytic poliomyelitis were notified and confirmed.

## **Poliomyelitis Vaccination**

During the year some 107,311 injections were given in the Riding, a substantial proportion to children of school age. The inoculation campaign in 1959 therefore continued to absorb a considerable amount of time of doctors, nurses and clerical staff.

## **Acute Nephritis**

Mention has been made in the reports for 1957 and 1958 of outbreaks of acute nephritis among school children and others in the Riding. In those years cases occurred mainly in that part of the Riding adjacent to York and in the Northallerton area. The causal organism of many of the cases was demonstrated to be the streptococcus pyogenes type 12 which was shown to spread both in school and at home.

In December, 1959, two cases of nephritis occurred in the Pickering area and, during the subsequent investigation, swabs were taken from more than 1,000 people, mostly school children. No less than 277 children were found to be harbouring the type 12 organism. At other times



during the year the organism was found in the Richmond district and elsewhere and, in the whole Riding during 1959 swabs were taken from some 1,526 people of whom 374 had positive swabs.

Emergency measures, including the administration of penicillin (to which the organism is sensitive) and exclusion from school, were taken in an attempt to prevent the onset of acute nephritis in those people with positive swabs and the spread of the germ. As far as is known, no case of nephritis occurred amongst those who had received prophylactic penicillin.

School health service staff, in particular Dr. W. R. M. Couper of Pickering, spent a considerable amount of time on this problem and they were most willingly assisted in the investigation and control of the outbreaks by Dr. D. J. H. Payne of the Public Health Laboratory Service and by general practitioners in Pickering, Richmond and elsewhere.

The medical staff received the fullest co-operation at all times from parents, teachers and children.

### **Tuberculosis**

Six school children were notified during the year as suffering from pulmonary tuberculosis. In all cases a careful investigation of home and other contacts was made to discover the source of the infection. Tuberculin testing, followed by B.C.G. vaccination in suitable cases, was carried out on school children thought to have been in contact with any known case of pulmonary tuberculosis.

In September, 1959, two children attending a village school were found to have enlarged glands of the neck and to have been infected with tuberculosis. The school milk supply was not at first suspected as being the cause of the infections because it came from a T.T. herd. Routine milk sampling by this department in early September produced, however, by mid-October, a positive result which was notified to the Divisional Veterinary Officer who is responsible for the supervision of T.T. herds. His investigations revealed that a considerable proportion of the herd had been infected.

Investigation of 44 more children attending the same village school showed that 8 had been infected by the milk, and that one of these had suffered glandular enlargement.

Outbreaks such as this were commonplace a generation ago and frequently led to serious illness in the infected children. The breakdown of the T.T. herd in late 1959 was discovered by means other than the routine supervision of the herd and, had it not been so, the outbreak of human illness could well have been more serious.

There would therefore appear to be a need for a tighter control of the purity of milk supplies in those areas where milk is drunk raw.

## SCHOOL MEALS

On one day in 1959, 32,061 pupils were taking school meals. The following table shows the school population and the numbers of children taking meals in school on similar sample days in the years 1949—1959 inclusive; it also shows the proportion of children taking meals expressed as a percentage of the existing school population:—

Year	School population	School Meals					
		Free		For payment		Total	%
		No.	%	No.	%		
1949	47,896	4,168	8.70	24,037	50.19	28,205	58.89
1950	48,087	4,237	8.81	22,653	47.11	26,890	55.92
1951	49,603	3,632	7.32	23,936	48.26	27,568	55.58
1952	51,420	3,425	6.66	25,392	49.38	28,817	56.04
1953	52,806	3,452	6.54	22,458	42.53	25,910	49.07
1954	53,766	3,215	5.98	24,667	45.88	27,882	51.86
1955	55,051	2,867	5.21	26,370	47.90	29,237	53.11
1956	55,403	2,658	4.90	26,524	49.88	29,182	54.78
1957	55,838	2,586	4.63	24,613	44.08	27,199	48.71
1958	56,645	2,646	4.67	27,255	48.12	29,901	52.79
1959	57,682	2,995	5.19	29,066	50.39	32,061	55.58

## MILK IN SCHOOLS.

### Consumption of Milk.

The table below shows the numbers and percentage of children taking milk at school, on sample days in the years 1950—1959 inclusive:

Year	1950	1951	1952	1953	1954	1955	1956	1957	1958	1959
Taking Milk— No. of children	35,967	36,557	37,521	39,442	40,859	42,231	42,750	41,571	44,644	45,372
Proportion of the school population	74.80	73.70	72.97	74.69	75.99	76.71	79.15	74.45	78.81	78.66



### Grades of Milk.

The numbers of schools receiving the various types of milk supply, in the years 1952—1959, are as follows:—

		1952	1953	1954	1955	1956	1957	1958	1959
Pasteurised milk	....	264	292	311	294	341	348	343	341
Tuberculin Tested milk	....	64	57	42	43	44	46	49	50
Accredited milk	....	1	1	—	—	—	—	—	—
Non-designated milk	....	38	25	19	25	25	19	17	13
Dried milk	....	8	5	8	19	7	6	6	4
No supply	....	1	—	—	—	—	—	—	—

The figures for 1959 include the four maintained special schools in the Riding, and 33 non-maintained schools. Of the latter, 29 schools received pasteurised milk, 3 T.T. milk and one non-designated milk.

### Quality of Milk.

School milk supplies have again been supervised by the county health inspectors who have taken 1,530 samples during visits to schools:—

Grade of Milk	Frequency of sampling	Frequency of Testing		
		Phosphatase	Methylene Blue	Biological
Tuberculin Tested	six monthly	—	—	six monthly
Pasteurised	.... quarterly	quarterly	quarterly	as required
Non-designated	.... quarterly	—	—	quarterly

The results of these tests and biological examinations were as follows:

Grade	No. taken	Methylene Blue Test		Phosphatase test		Biological examination		Brucella abortus	
		Passed	Failed	Passed	Failed	Tb. Neg.	Tb. Pos.	Neg.	Pos.
Pasteurised	.... 1,385	1,112	41	1,361	17	4	—	3	—
Tuberculin Tested	.... 94	11	3	—	—	93	1	93	1
Non-designated	51	—	—	—	—	51	—	51	—



It will be observed that 17 of 1,378 samples (7 of 1,257 in 1958) failed to pass the phosphatase test. Twelve of the 17 failures were produced outside the Riding and therefore caused no reflection on the County as a licensing authority. Infection with *brucella abortus* was again detected (1 in 1957, 6 in 1958) in both tuberculin tested and non-designated milk. Pasteurised milk was naturally free from this important infection. As has been reported above (page 32), one sample of T.T. milk was found to contain tubercle bacilli on biological testing.

## PHYSICAL EDUCATION

I am indebted to the Secretary for Education for the following report:

“Since the last report five new secondary schools have been opened and two grammar school buildings have been extended to include hall-gymnasias, adding further to the facilities for Physical Education.

For the first time since the war the supply of men specialist teachers of Physical Education has started to narrow a gap which, due to the new building, had tended to leave gymnasias inadequately staffed. The present position is that half of the posts are filled by men who have undertaken a third year specialist course as against last year's position of one-third. A further sixth of the teachers studied Physical Education as a main subject during a two year Training College Course leaving one-third non-specialist teachers, some of whom, of course, are teaching in schools without a gymnasium. The picture on the women's side is that only 20% of the teachers of Physical Education are fully trained specialists.

Courses in various aspects of Physical Education have been held throughout the year in various centres. The biannual Easter Residential Course based on the North Riding Training College, Scarborough, gave basic courses in Secondary Girls, Secondary Boys, Primary Urban, Primary Rural and also Infant work allied with supplementary courses in Minor Games, Dance, Swimming or Duke of Edinburgh Award work. In the October half term holiday, an Outdoor Activities course was held in the Lake District to give further help and guidance to those concerned in the furthering of the Duke of Edinburgh Award Scheme which has developed rapidly since the North Riding Education Committee became an Experimenting Body six months ago. In November, a week-end course for men in Olympic Gymnastics was held at Scarborough using the very excellent facilities of the double gymnasium at the new High School for Boys; the response from the teachers was 26 out of a possible 50.

Wrea Head College had well supported courses in Scottish Dancing, English Folk Dance and Cricket Coaching. In addition, a Tennis Course for selected schoolgirls was held.

For the first time for many years, there was an ideal summer which stimulated camping, and the Committee's sites at Scalby, Low Dalby and Bainbridge were quite well booked and there was a considerable development in light weight camping in connection with the Duke of Edinburgh Award Scheme. This was made possible by the provision of certain equipment provided by the authority and by the considerable energy and ingenuity of certain schools in making their own tents and other equipment.



Mr. Ted Lester was once again the part-time cricket coach for the Grammar Schools and the success of the continued coaching is reflected in the report on cricket included later under the activities of the Schools Athletic Union.

The Football Association have again given considerable coaching services in our secondary schools but unfortunately were unable to cover the schools in the Scarborough area.

Swimming continues to be a valuable part of Physical Education severely restricted by lack of pools. With the opening of the new County Modern Schools at Bedale and Richmond it has been found possible to accommodate an age group from each school at the Sandes Soldiers' Home Bath at Catterick.

The Schools Athletic Union continues to be a most active body. This year for the first time the All Yorkshire Schools Athletics Championships were staged at the Redcar Lane County Modern and Cleveland Grammar Schools, Redcar. The Education Committee provided the extra jumping pits needed for such an event, some 2,000 young athletes taking part, and a Local Sub-Committee were responsible for the detailed arrangements. The meeting was highly successful. From this meeting, the Yorkshire team to compete in the All England Competition was selected and 8 North Riding boys and girls were included. The annual North Riding Athletics Meeting was held at Thirsk Grammar/Modern School.

Teams were entered in the three sections of the Yorkshire Schools Cross Country Championships at Rotherham and once again the North Riding were winners of the Junior Team Race.

The Swimming Gala was held at the Yearsley Baths, York, and an unrehearsed item, the quick rescue of a girl diver in difficulties by a Scarborough boy, showed in a very practical way the value of Life Saving. For the first time the North Riding entered a team in the Yorkshire competition and 4 children went a stage further and swam for Yorkshire, 3 winning their events.

The popularity of the Netball Rally was such that the Senior and Junior Tournaments had to be held on separate days. 26 teams entered the Junior Section and 24 took part in the Senior.

Similarly, the Hockey Rally, due to excellent entry, was held on two separate days. A representative hockey team played in the Yorkshire Hockey Tournament for the first time.

In Lawn Tennis, rallies were held for Senior and Junior Girls and also for Senior and Junior Boys.

The Grammar School Cricket XI had a most successful season and won the three games played very convincingly. Two boys, one from Sir William Turner's, and one from the Scarborough High School for Boys, played on different occasions for England Grammar Schools XIs and both put up excellent performances. The value of the continued coaching in schools is now revealing itself. At the "Under 16" level the Eleven played in the Yorkshire Competition but were only second in their section and did not enter the knock-out stage of the competition. A Guisborough Grammar School boy played for Yorkshire Schoolboys in all their matches.

Association Football showed considerable activity. Area teams as usual played in the Yorkshire and All England Competitions and for the first time a North Riding Under-15 representative team was selected to play further games independent of the competition. The Grammar Schools XI played 3 matches, and during the season three North Riding Boys played in the Yorkshire Grammar Schools XI.

The activities of the Association in featuring county competition and participation in representative fixtures at the highest level is a considerable and valuable stimulus in raising general standards of performance in schools."

## **NURSERY SCHOOLS**

The Committee is responsible for maintaining a nursery school at Scarborough, providing 44 places, and nursery classes attached to the following schools:—

South Bank, Cromwell Road Infant  
 South Bank, Princess Street Infant  
 South Bank, R.C. Infant  
 Scarborough, Friarage Infant

## **OTHER MEDICAL EXAMINATIONS**

### **(a) Employment of School Children**

During the year 656 children were medically examined under the provisions of the bye-laws relating to the employment of children between 13 years and school leaving age. All but five were found to be fit for employment without detriment to their health.

### **(b) Medical examination of entrants to the teaching profession**

The procedure adopted as from the 1st April, 1952 was continued, X-ray examination being used in all cases. During 1959, 78 male and 147 female candidates were examined by the school medical officers.

### **(c) Superannuation medical examinations**

The medical staff of the school health service examined in 1959, 72 candidates for superannuable appointment to the staff of the education authority and 325 non-superannuable candidates employed by the Education Committee.

## **SCHOOL HYGIENE**

The county health inspectors, when visiting schools for milk sampling purposes, write comments in the school log books on any sanitary matters relevant to individual schools. The number of rural schools concerning which recommendations with regard to the boiling of drinking water were operative during the four quarters of the year were as follows:—

1959	1st quarter	2nd quarter	3rd quarter	4th quarter
No. of Schools ....	28	26	38	43



For the past three years and until the end of the second quarter of 1959 there was a progressive improvement in the situation as fewer and fewer schools were advised to boil drinking water and as more schools became equipped with Berkefeld filters. In the latter half of 1959, however, there was a breakdown in the purity of water in two large rural districts and many more schools were advised to boil drinking water.

There was thus a deterioration in the general position during the year.

## **SCHOOL DENTAL SERVICE**

### **Report by Mr. I. J. Faulds, Principal School Dental Officer.**

There was little numerical change in the establishment of the dental staff between December 1958 and December 1959. Mr. J. L. Birkett and Miss L. Etherington resigned, but we were able to recruit the part-time assistance of Mr. K. Calder and to welcome Mrs. G. L. Wigin to the staff again. Dr. R. B. Bell joined us as anaesthetist in January, so that we have not had such frequent need to call on the services of Drs. J. G. Cranmer, S. J. Halkett and E. Holden. Dr. Bell's appointment has also allowed me to devote more sessions to orthodontics. Mr. F. Shaw, part-time technician in Scarborough, left to take up an appointment in Hull during the year. It was decided not to replace him, but that all the prosthetic and orthodontic appliances should be made in the Northallerton Laboratory.

Clifton, Eastfield and Leyburn clinics were opened during the year, and improvements carried out on New Earswick. Very regretfully I must report that Malton still awaits a new clinic.

It has proved impossible to recruit a dental officer for the South Bank area, in spite of many advertisements. At the moment all that can be done is to offer a skeleton service, and even that, of course is given at the expense of treatment in adjacent areas. The finding of the Royal Commission, suggesting a salary of £2,500, as the expectant award for the dentist in general practice, does not encourage recruitment to the School Dental Service with its present maximum salary of £1,730. Nor does the evidence which the County Councils' Association placed before the Commission assist in establishing the School Dental Service as a vocation for the young dental surgeon. It seems incredible that after ten years of the National Health Service Act, the dental condition of children should be worse than it was after five years of war, and that no body in authority is greatly perturbed about it, or is prepared to take drastic measures to overcome the apathy shown by the nation. We dentists are not without blame. We seem loath to acknowledge that dental treatment of the adult is to a great extent an admission of our failure to provide adequate service for the young. Year by year, children remain under-treated while the cost of adult treatment rises annually.

Once more the figures in Table V (including Scarborough) show a slight increase in the number of patients treated and in attendances made

compared with last year, but the increase in the number of fillings inserted and teeth filled is more substantial. What is most satisfactory is the reduction in the number of teeth, both temporary and permanent, that have had to be extracted, and in the number of general anaesthetics that have been administered for this purpose.

Of 28,156 children offered treatment, 17,464 actually attended for treatment, making on average almost two attendances each. 2,294 children attended the clinic as "Specials". 5,703 permanent teeth, 12,422 temporary teeth were extracted, a general anaesthetic being administered to 8,474 patients for this treatment. Fillings to the number 16,659 were inserted in permanent teeth, and 2,362 in temporary teeth.

197 new patients were offered orthodontic treatment during the year, so that with the 217 patients carried forward from last year, a total of 414 patients attended for this form of treatment. Treatment was completed for 148 children. Treatment was discontinued for 38; this included not only those children who failed to co-operate, but children who were transferred to other Local Authorities.

The staff in the laboratory consisted at the end of the year of a Chief Technician, a Senior Technician and a final year Apprentice Technician. Details of all work done in the laboratory during the year are as follows:—Orthodontic Appliances 444, Dentures 341, Crowns 7, Gold Inlays 21, Models cast 2,106. Some of this work was done for expectant and nursing mothers attending the North Riding clinics, and some for the City of York Education Committee.

As reported last year the school entrants showed a deplorable dental condition, and a scheme was started to encourage mothers of three year old children to bring the pre-school child to the dental clinic, or to seek advice from their own dentist. It would be unwise to generalise from the result of the first year of this scheme, but it is of interest to note that though the number of attendances has more than doubled those of 1958, the extractions have only increased by less than 10%, while the fillings have more than trebled. All parents who attend are enthusiastic about the scheme, but many others have not even had the courtesy to acknowledge our letters.

I cannot report any improvement in oral hygiene as a whole. Constant sweet sucking is still far too prevalent and more discrimination in the type of "snack" sold at school break would be beneficial. Apples proved very successful at one school where the Headmaster was most co-operative. Many children undoubtedly prefer a glutinous sweet to an apple, when given the choice. But must they be given the choice?

In conclusion I would like to thank all members of the dental staff for their co-operation and support throughout the year.

IAN FAULDS.



# MEDICAL INSPECTION AND TREATMENT

## PART I.

### MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED AND ASSISTED PRIMARY AND SECONDARY SCHOOLS

(INCLUDING NURSERY AND SPECIAL SCHOOLS)

**Table A—Periodic Medical Inspections**

Age Groups Inspected (by year of birth)	No. of Pupils Inspected	Physical Condition of Pupils Inspected			
		Satisfactory		Unsatisfactory	
		No.	% of Col 2	No.	% of Col 2
		(3)	(4)	(5)	(6)
1955 and later	150	146	97.33	4	2.67
1954	2,606	2,604	99.92	2	.08
1953	2,615	2,613	99.92	2	.08
1952	1,602	1,599	99.81	3	.19
1951	2,864	2,860	99.86	4	.14
1950	1,302	1,300	99.85	2	.15
1949	1,169	1,164	99.57	5	.43
1948	1,495	1,485	99.33	10	.67
1947	2,758	2,748	99.64	10	.36
1946	2,435	2,419	99.34	16	.66
1945	1,824	1,801	98.74	23	1.26
1944 and earlier	3,288	3,258	99.09	30	.91
Total	24,108	23,997	99.54	111	.46



**Table B—Pupils found to require treatment at Periodic Medical Inspection**  
(EXCLUDING DENTAL DISEASE AND INFESTATION WITH VERMIN)

Age Groups Inspected (by year of birth) (1)	For defective vision (excluding squint) (2)	For any of the other conditions recorded in Part II (3)	Total individual pupils (4)
1955 and later	—	9	9
1954	51	228	279
1953	81	214	273
1952	74	147	221
1951	137	181	318
1950	58	74	131
1949	78	85	161
1948	97	110	201
1947	157	120	275
1946	123	131	250
1945	117	116	227
1944 and earlier	184	165	342
Total	1,157	1,580	2,707

**Table C—Other Inspections**

Number of Special Inspections	....	8,497
Number of Re-inspections	....	6,852
Total	....	<u>15,349</u>

**Table D—Infestation with Vermin**

(i) Total number of individual examinations of pupils in schools by the school nurses or other authorised persons	....	....	161,528
(ii) Total number of individual pupils found to be infested	....	....	2,434
(iii) Number of individual pupils in respect of whom cleansing notices were issued (Section 54 (2), Education Act, 1944)	....	....	29
(iv) Number of individual pupils in respect of whom cleansing orders were issued (Section 54 (3) Education Act, 1944)	....	....	14

## PART II.

## Return of Defects found by Medical Inspection during the year.

Table A—Periodic Inspections

Defect or Disease	PERIODIC INSPECTIONS (T—Requiring treatment. O—Requiring observation)							
	Entrants		Leavers		Others		Total	
	T	O	T	O	T	O	T	O
Skin ....	35	28	64	32	174	61	273	121
Eyes—								
(a) Vision ....	132	128	301	412	724	706	1,157	1,246
(b) Squint ....	64	41	5	19	61	58	130	118
(c) Other ....	16	8	11	21	34	33	61	62
Ears—								
(a) Hearing ....	14	30	6	40	34	95	54	165
(b) Otitis Media	35	67	3	13	52	47	90	127
(c) Other ....	6	11	6	5	32	16	44	32
Nose or Throat ....	104	289	18	37	142	209	264	535
Speech ....	35	67	3	13	52	47	90	127
Lymphatic Glands	1	45	—	5	6	22	7	72
Heart ....	13	51	12	43	33	86	58	180
Lungs ....	19	36	12	44	50	45	81	125
Developmental—								
(a) Hernia ....	4	5	1	2	7	10	12	17
(b) Other ....	5	8	8	15	31	30	44	53
Orthopaedic—								
(a) Posture ....	6	9	5	37	18	34	29	80
(b) Feet ....	72	57	60	111	99	101	231	269
(c) Other ....	17	35	15	46	40	71	72	152
Nervous System—								
(a) Epilepsy ....	4	5	2	7	9	10	15	22
(b) Other ....	2	5	—	6	3	10	5	21
Psychological								
(a) Development	1	24	24	25	52	115	77	164
(b) Stability ....	2	32	3	29	14	97	19	158
Abdomen ....	4	7	2	7	5	17	11	31
Other ....	36	24	40	19	83	63	159	106

**Table B. Special Inspections****A—Return of Defects found by Medical Inspection during the year.****B—Special Inspection**

Defect or Disease	SPECIAL INSPECTIONS	
	Requiring treatment	Requiring observation
Skin ....	347	2
Eyes—		
(a) Vision ....	1741	249
(b) Squint ....	123	15
(c) Other ....	48	1
Ears—		
(a) Hearing ....	123	23
(b) Otitis Media ....	25	—
(c) Other ....	30	—
Nose or Throat ....	27	3
Speech ....	16	—
Lymphatic Glands ....	2	1
Heart ....	11	5
Lungs ....	13	21
Developmental—		
(a) Hernia ....	—	—
(b) Other ....	2	—
Orthopaedic—		
(a) Posture ....	54	2
(b) Feet ....	649	42
(c) Other ....	398	6
Nervous system—		
(a) Epilepsy ....	1	2
(b) Other ....	2	2
Psychological—		
(a) Development ....	223	13
(b) Stability ....	118	1
Abdomen ....	4	2
Other ....	765	5

**PART III.****Treatment of Pupils attending Maintained and Assisted Primary and Secondary Schools. (Including Nursery and Special Schools)****TABLE A. EYE DISEASES, DEFECTIVE VISION AND SQUINT.**

	Number of cases known to have been dealt with
External and other, excluding errors of refraction and squint ....	109
Errors of refraction (including squint) ....	2,831
<b>Total</b> ....	<b>2,940</b>
Number of pupils for whom spectacles were prescribed ....	1,556



TABLE B. DISEASES AND DEFECTS OF EAR, NOSE AND THROAT.

			Number of cases known to have been treated
Received operative treatment	....	....	
(a) for diseases of the ear	....	....	9
(b) for adenoids and chronic tonsillitis	....	....	373
(c) for other nose and throat conditions	....	....	17
Received other forms of treatment	....	....	324
Total	....	....	723

Total No. of pupils in school who are known to have been provided  
with hearing aids (a) in 1959 .... 14  
(b) in previous years .... 50

TABLE C. ORTHOPAEDIC AND POSTURAL DEFECTS.

			Number of cases known to have been treated
(a) Pupils treated at clinics or out-patient Departments	....	....	997
(b) Pupils treated at school for Postural Defects	....	....	60
Total	....	....	1,057

TABLE D. DISEASES OF THE SKIN (excluding uncleanliness for which see Table D of Part I)

			Number of cases known to have been treated
Ringworm— (i) Scalp	....	....	61
(ii) Body	....	....	17
Scabies	....	....	11
Impetigo	....	....	67
Other skin diseases	....	....	850
Total	....	....	1,006

TABLE E. CHILD GUIDANCE TREATMENT.

Number of pupils treated at Child Guidance Clinics .... 113

TABLE F. SPEECH THERAPY

Number of pupils treated by Speech Therapists .... 273

TABLE G. OTHER TREATMENT GIVEN

Pupils with minor ailments .... 1,761  
Pupils who received B.C.G. vaccination (by chest physicians) .... 97  
Nephritis Surveys .... 374

## PART IV.

DENTAL INSPECTION AND TREATMENT CARRIED OUT BY THE  
AUTHORITY

(1) Number of pupils inspected by the Authority's Dental Officers:—				
(a) At Periodic Inspections	....	....	....	55,438
(b) As Specials	....	....	....	2,294
Total (1)				57,732
(2) Number found to require treatment	....	....	....	36,932
(3) Number offered treatment	....	....	....	30,450
(4) Number actually treated	....	....	....	17,464
(5) Number of attendances made by pupils for treatment, including those recorded at heading 11 (h)	....	....	....	34,668
(6) Half days devoted to:				
Periodic (School) Inspection	....	....	....	512
Treatment	....	....	....	5,137
Total (6)				5,649
(7) Fillings:				
Permanent Teeth	....	....	....	16,673
Temporary Teeth	....	....	....	2,362
Total (7)				19,035
(8) Number of teeth filled:				
Permanent Teeth	....	....	....	14,613
Temporary Teeth	....	....	....	2,205
Total (8)				16,818
(9) Extractions:				
Permanent Teeth	....	....	....	5,703
Temporary Teeth	....	....	....	12,422
Total (9)				18,125
(10) Administration of general anaesthetics for extractions				
....	....	....	....	8,472
(11) Orthodontics:				
(a) Cases commenced during the year	....	....	....	197
(b) Cases carried forward from previous year	....	....	....	217
(c) Cases completed during the year	....	....	....	148
(d) Cases discontinued during the year	....	....	....	38
(e) Pupils treated with appliances	....	....	....	414
(f) Removable appliances fitted	....	....	....	381
(g) Fixed appliances fitted	....	....	....	3
(h) Total attendances	....	....	....	2,829
(12) Number of pupils supplied with artificial dentures	....	....	....	248
(13) Other operations:				
Permanent teeth	....	....	....	9,168
Temporary teeth	....	....	....	1,912
Total (13)				11,080

**Minor Ailments****CLINIC**

Thornaby  
South Bank  
Grangetown  
Grangetown

**CLINIC SERVICES****LOCATION**

.... School Clinic, George Street  
.... Albert House, Normanby Road  
.... Mission Hall, Lee Road  
.... Alderman Wm. Jones County  
School

**SESSIONS**

.... Tuesday, Friday 9 a.m.  
.... Monday, Friday 9 a.m.  
.... Tuesday, Friday 9 a.m.  
.... Monday, 9 a.m.

Redcar  
Saltburn  
Guisborough  
Lingdale  
New Skelton  
Whitby  
Whitby  
Clifton  
New Earswick  
New Earswick  
Scarborough  
Scarborough  
Scarborough  
Scarborough  
Easingwold

.... 5, Turner Street, Coatham  
.... The Clinic, Bath Street  
.... Health Clinic, Park Lane  
.... School Clinic, High Street  
.... Methodist Church  
.... School Clinic, Grape Lane  
.... East Whitby School  
.... Clifton Without Jnr. School  
.... County Junior School  
.... Joseph Rowntree C.M. School  
.... Old Hospital, Friars Way  
.... Northstead School  
.... Hinderwell School  
.... Westway, Eastfield  
.... Easingwold Grammar/Modern  
School

.... Monday, Friday 9-30 a.m.  
.... Wednesday 9-30 a.m.  
.... Friday 9 a.m.  
.... Wednesday 9 a.m.  
.... Wednesday 9 a.m.  
.... Monday, Friday 9 a.m.  
.... Wednesday 10 a.m.  
.... Tuesday, Friday 10 a.m.  
.... Wednesday 11 a.m.  
.... Tuesday, Friday 10 a.m.  
.... Monday-Saturday 9 a.m.  
.... Wednesday 9-30 a.m.  
.... Thursday 9-30 a.m.  
.... Wednesday 9-30 a.m.  
.... Wednesday 10 a.m.

Pickering  
Loftus  
Brotton  
Carlin How

.... Health Clinic, Train Lane  
.... Zetland School Clinic  
.... County Modern School Clinic  
.... J.I.C. Evening Institute,  
Brotton Road

.... Monday to Friday 9 a.m.  
.... Friday 10 a.m.  
.... Friday 10 a.m.  
.... Friday 9-30 a.m.

**Orthopaedic Clinics**

Thornaby  
South Bank  
Normanby  
Redcar

.... School Clinic, George Street  
.... Albert House, Normanby Road  
.... Windsor Road  
.... 5, Turner Street, Coatham

.... Tuesday, Friday 2 p.m.  
.... Tuesday, Friday 10-30 a.m.  
.... Friday 9-30 a.m.  
.... Thursday, 10-30 a.m.  
(except 4th Thursday in  
each month).

Carlin How  
Guisborough  
Whitby

.... Evening Institute, Brotton Rd.  
.... Health Clinic, Park Lane  
.... Health Clinic, Grape Lane

.... Monday 10-30 a.m.  
.... Monday 2 p.m.  
.... Monday and Wednesday  
2 p.m.

Kirkbymoorside

.... Adela Shaw Orthopaedic  
Hospital

.... 3rd Wednesday in each  
alternate month 2 p.m.

Malton

.... The Friends' Meeting House

.... 4th Wednesday in each  
alternate month 2 p.m.

York

.... The School Clinic, Rougier St.

.... 2nd Wednesday in each  
alternate month 2 p.m.

Northallerton

.... Zetland Street Clinic

.... 2nd Wednesday in each  
alternate month 10-30 a.m.

Richmond

.... Health Clinic, Quaker Lane

.... 4th Saturday in each  
month 10-30 a.m.

Scarborough  
Scarborough

.... Old Hospital, Friars Way  
.... Westway, Eastfield

.... Tuesday, Friday 9 a.m.  
.... Alternate Thursdays 2 p.m.



**Speech Therapy Clinics**

CLINIC	LOCATION	SESSIONS
Richmond	.... Health Clinic, Quaker Lane	.... Monday, Wednesday, Friday 2 p.m.
Malton	.... Friends' Meeting House	.... Monday 1-30 p.m.
Pickering	.... Health Clinic, Train Lane	.... Monday, 9 a.m.
Whitby	.... School Clinic, Grape Lane	.... Monday 10 a.m.
New Earswick	.... Joseph Rowntree C.M. School	.... Monday 9-30 a.m.
Scarborough	.... Old Hospital, Friarsway	.... Tuesday to Friday 9-30 a.m.
Scarborough	.... Westway, Eastfield	.... Wednesday 9-30 a.m.
Clifton	.... Clifton without County Junior School	.... Wednesday 9-30 a.m.
Easingwold	.... Grammar and Modern School	Tuesday 9-30 a.m.
Thirsk	.... Grammar and Modern School	Friday 9-30 a.m.
Northallerton	.... Zetland Street Clinic	.... Thursday 9-30 a.m.

**Ophthalmic Clinics**

Thornaby	.... School Clinic, George Street	.... Thursday 1-30 p.m.
South Bank	.... Albert House, Normanby Road	Tuesday 2 p.m.
Redcar	.... 5, Turner Street, Coatham	.... Friday 1-30 p.m.
Guisborough	.... Health Clinic, Park Lane	.... Monday 2 p.m.
Whitby	.... School Clinic, Grape Lane	.... Friday 11-15 a.m. as required (all day).
Northallerton	.... Zetland Street Clinic	.... Wednesday 9-30 a.m. as required (all day).
Richmond	.... Health Clinic, Quaker Lane	.... Wednesday 9-30 a.m. as required (all day).
Thirsk	.... Lambert Memorial Hospital	.... Saturday 9-45 a.m.
Malton	.... Malton, Norton and District Hospital	.... As required
Kirkbymoorside	.... Adela Shaw Orthopaedic Hospital	” ”
Flaxton	.... 27, High Petergate, York	.... ” ”
	County Hospital, York	.... ” ”
Scarborough	.... Old Hospital, Friars Way	.... Monday 10-30 a.m.
Pickering	.... Health Clinic, Train Lane	.... As required.

**Dental Clinics**

Thornaby	.... School Clinic, George Street	.... As required
South Bank	.... Albert House, Normanby Road	.... ” ”
Redcar	.... 5, Turner Street, Coatham	.... ” ”
Saltburn	.... The Clinic, Bath Street	.... ” ”
Guisborough	.... Health Clinic, Park Lane	.... ” ”
Whitby	.... School Clinic, Grape Lane	.... ” ”
Scarborough	.... Old Hospital, Friars Way	.... ” ”
New Earswick	.... Jos. Rowntree C.M. School	.... ” ”
Northallerton	.... Zetland Street Clinic	.... ” ”
Richmond	.... Health Clinic, Quaker Lane	.... ” ”
Hipswell	.... Hipswell County Modern School	” ”
Ryedale	.... Ryedale C.M. School, Nawton	.... ” ”
Pickering	.... Health Centre, Train Lane	.... ” ”
Lingdale	.... School Clinic, High Street	.... ” ”

**Dental Clinics—continued**

CLINIC	LOCATION	SESSIONS
Easingwold	.... Easingwold Grammar/Modern School	.... As required
Thirsk	.... Thirsk Grammar/County Modern School	.... „ „
Bedale	.... Bedale County Modern School	
Leyburn	.... Wensleydale County Modern School	„ „
Clifton	.... Canon A. R. Lee County Modern School	.... „ „
Brotton	.... Skelton & Brotton County Modern School	.... „ „
Loftus	.... Zetland Junior School, Loftus	.... „ „

**Ear, Nose and Throat Clinics**

Thornaby	.... School Clinic, George Street	.... Every 4th Wednesday 10 a.m. and every Thursday 9-30 a.m.
Normanby	.... Windsor Road	.... Every 4th Thursday 10 a.m.
Redcar	.... 5, Turner Street, Coatham	.... Every 4th Wednesday 10 a.m.
Guisborough	.... Health Clinic, Park Lane	.... Every 4th Wednesday 10 a.m. Monday weekly 9-30 a.m.
Scarborough	.... Old Hospital, Friars Way	.... 1st Wednesday in each month 10 a.m.

**Artificial Sunlight Clinics**

Thornaby	.... Health Centre, Francis Street	Tuesday, Thursday 9-30 a.m.
Guisborough	.... Health Clinic, Park Lane	.... Friday 2 p.m.
Whitby	.... District Health Office, Grape Lane	.... Friday 9 a.m.
Richmond	.... Lennox House, Maison Dieu	.... Tuesday, Friday weekly 11 a.m. and 4 p.m.
Scarborough	.... Medical Baths	.... Monday, Thursday, Boys 9 a.m. Girls 9-30 a.m.
South Bank	.... Albert House, Normanby Road	Tuesday, Friday 10 a.m.

**Remedial Exercise Clinic**

Scarborough	.... Old Hospital, Friars Way	.... Tuesday, Friday 9 a.m.
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**Skin Clinic**

South Bank	.... Albert House, Normanby Road	Wednesday 9-30 a.m.
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**Child Guidance Clinic**

Clifton	.... Greystones, Clifton Hospital	.... As required
Scarborough	.... Old Hospital, Friars Way	.... Wednesday, weekly.
Thornaby	.... Health Centre, Francis Street	Saturday, weekly, 9-30 a.m.
Redcar	.... School Clinic, 5 Turner St.	.... As required.

NORTH RIDING OF YORKSHIRE  
COUNTY COUNCIL

SCARBOROUGH  
DIVISIONAL EXECUTIVE

# REPORT

OF THE  
DIVISIONAL  
SCHOOL MEDICAL OFFICER  
FOR THE YEAR 1959







# Report

of the Divisional School Medical Officer

for the year 1959

## **The Chairman and Members of Scarborough Divisional Executive**

MADAM CHAIRMAN, LADIES AND GENTLEMEN,

While in general the results of the work of the School Health Service last year are satisfactory, I would draw your attention to two items in the report. First is Dr. Cameron's comment on the need for more nursery school places. This I would strongly support. Apart from the general considerations mentioned by Dr. Cameron there are, I feel, special circumstances in Scarborough which make this increased provision all the more desirable.

The second point is perhaps related to the first. I refer to Miss Milbanke's report on the work of the Child Guidance Clinic. The Committee will note, I feel sure, with concern, that in spite of increased sessions the waiting list increased substantially during the year.

In conclusion, I have to thank those who have made contributions to this report and other members of the Committee's staff for their support and co-operation.

I am, Madam Chairman, Ladies and Gentlemen,

Your obedient servant,

W. G. EVANS,

Divisional School Medical Officer.

School Clinic,  
Old Hospital,  
Friars Way,  
Scarborough.  
*August, 1960.*

## 1. GENERAL.

The total number of pupils on the school registers in September, 1959 amounted to 7,595, a decrease of 4 when compared with last year's figure, whilst the number of Primary and Secondary Schools was 37, two less than in the previous year as a result of the closure of Central C.P. and Hutton Buscel Schools.

(a) Number of Primary School Departments in the Division (excluding Childhaven Nursery School) ....	27
(b) Number of Secondary Modern Schools in the Division ....	7
(c) Number of Grammar and Technical Schools ....	3
(d) Number of pupils on the registers of Primary Schools (excluding Childhaven Nursery School) ....	4,257
(e) Number of children in Childhaven Nursery School ....	45
(f) Number of children in the Special Class at No. 9 Seamer Road ....	36
(g) Number of pupils on the rolls of Secondary Modern Schools ....	2,154
(h) Number of pupils on the rolls of Grammar and Technical Schools ....	1,103

## 2. STAFF.

### (i) Medical Officers

W. G. Evans, M.A., M.B., B.Chir., D.P.H., Divisional School Medical Officer.

Elizabeth R. Cameron, M.B., Ch.B., D.P.H., School Medical Officer.

Elizabeth D. Ellison, B.A., Ch.B., Temporary School Medical Officer (part-time).

Sydney E. Jackson, M.B., Ch.B., Temporary School Medical Officer (part-time).

### (ii) Dental Surgeons

D. Bewes Atkinson, L.D.S., R.C.S.Eng. (part-time).

Mrs. S. R. Seaman, B.D.S.(London), L.D.S., R.C.S.Eng.

H. C. Morgan, L.D.S., R.C.S. Eng. (part-time).

R. Mackenzie, M.B., B.S., M.R.C.S., L.R.C.P., R.C.S. (part-time Dental Anaesthetist).

### (iii) Specialist Officers (part-time)

\*Ophthalmic Surgeon J. Ellison, M.R.C.S., L.R.C.P.

\*Orthopaedic Surgeon A. G. Quinlan, F.R.C.S.

\*Psychiatrist C. H. Neville-Smith, M.B., D.C.H., D.P.M.

\*E.N.T. Surgeon G. L. Thompson, M.A., M.B. (Cantab.) F.R.C.S.

*\*By arrangement with Leeds Regional Hospital Board.*



(iv) **School Nurses**

Within the Borough of Scarborough and the Urban District of Scalby, school nursing was carried out by seven Health Visitors/School Nurses and one Clinic Nurse, viz:

Mrs. M. D. East, S.R.N., S.C.M., H.V.Cert. (resigned 1st July, 1959).

Miss A. Kind, S.R.N., S.C.M., H.V.Cert.

Mrs. M. M. Lowen, S.R.N., S.C.M., Q.N., H.V.Cert.

Miss B. Merryweather, S.R.N., H.V.Cert.

Mrs. R. A. Morgan, S.R.N., H.V.Cert.

Mrs. H. Rowbotham, S.R.N., S.C.M.; H.V.Cert.

Mrs. P. Young, S.R.N., S.C.M., H.V.Cert. (appointed 2nd March, 1959).

Miss M. E. Bowes, S.R.N., O.N.C. (appointed Clinic Nurse 6th January, 1959).

School nursing in the Scarborough Rural District area was conducted by three District Nurses.

(v) **Orthopaedic Nurse**

Miss B. D. Rowell, S.R.N., S.C.M., Orth. Cert. (part-time).

(vi) **Speech Therapist**

Miss A. Mawson, L.C.S.T. (appointed 1st September, 1959).

(vii) **Dental Attendants**

Mrs. M. Warner.

Mrs. I. Atkinson (part-time) (resigned 6th February, 1959).

Mrs. K. Gullen (part-time) (appointed 9th February, 1959).

(viii) **Dental Technician**

F. Shaw (part-time) (resigned 30th June, 1959).

(ix) **Clerks**

J. R. Bassett, B.Com. (Senior Clerk).

Miss J. M. Clarke.

Miss M. Claybourn.

### 3. **MEDICAL INSPECTION OF PUPILS.**

The arrangements for periodic medical inspections at schools were the same as in previous years, whereby new entrants to and children in the 7—8 and 10—11 year age groups at primary schools, and all pupils, except those in their first year, at secondary schools were inspected. Such inspections were carried out in 26 primary and 9 secondary schools and also at the Technical Institute. Furthermore, all children at Childhaven Nursery School and Friarage Nursery Class were inspected twice during the year. Altogether a total of 4,280 periodic medical inspections were made in 1959, being a decrease of 567 compared with the number made in the previous year.

Special inspections by the school medical officers amounted to 552 and re-inspections 935 as against 528 and 943 respectively in 1958.

#### 4. FINDINGS AT PERIODIC MEDICAL INSPECTION

(a) The number of children found to require treatment was 664, representing 15.51% of those inspected. This is an increase over last year's proportion (14.48%), but there does not appear to be anything significant about this, and it is not out of keeping with the findings over previous years as illustrated in the following table:—

Year	Number of Children	
	Inspected	Found to require treatment (excluding dental diseases and infestation with vermin)
1949	3880	587 (15.13%)
1950	4470	604 (13.51%)
1951	4071	486 (11.94%)
1952	4431	599 (13.52%)
1953	4069	511 (12.56%)
1954	4567	822 (18.00%)
1955	4667	731 (15.66%)
1956	4446	645 (14.51%)
1957	4613	525 (11.38%)
1958	4847	702 (14.48%)
1959	4280	664 (15.51%)

Details of the number of children requiring treatment, classified according to year of birth, are given in Table B of Part I of the Appendix to this report, and the actual defects or diseases in Table A of Part II.

##### (b) Physical Condition

Since 1956 the "physical" condition of pupils has been classified as either "satisfactory" or "unsatisfactory," whereas in previous years their "general" condition was graded as "Good," "Fair" or "Poor". From Table A of Part I of the Appendix, which gives the classification of "physical" condition according to year of birth, it will be seen that 100 (or 2.34%) of the 4,280 pupils subjected to routine medical inspection were considered to be "unsatisfactory." Findings in previous years were as follows:—

Year	Number of Pupils Inspected	General Condition		
		Good %	Fair %	Poor %
1949	3880	43.79	54.87	1.34
1950	4470	49.33	50.02	0.65
1951	4071	51.24	48.07	0.69
1952	4431	58.47	41.03	0.50
1953	4069	59.45	39.96	0.59
1954	4567	61.66	37.92	0.42
1955	4667	57.77	41.91	0.32
		Physical Condition		
			Satisfactory	Unsatisfactory
1956	4446	—	97.71	2.29
1957	4613	—	97.85	2.15
1958	4847	—	97.79	2.21
1959	4280	—	97.66	2.34



### (c) **Cleanliness**

As far as possible, the school nurses endeavour to inspect all pupils every term, and they follow-up those who are infested. During the year they made 21,892 inspections and 351 pupils were found to be infested with nits and/or pediculi. This latter figure includes cases of children with only the odd nit, but some 82 were heavily infested. In the previous year 244 pupils were found to be infested.

These figures might seem to show a slight deterioration of the position. In fact I believe that the employment of a nurse almost entirely on this problem in the worst affected schools has resulted in the increased number of inspections, and also in the increase in the number of infested children found. I also have reason to believe that her efforts at educating some of the more unco-operative families have shown signs of bearing fruit.

The incidence of verminous conditions in schools is given in the following table which shows that this problem is not general to all schools. In fact nearly half of them were free from infestation, but in 2 of them were concentrated nearly one half of the total cases.

Percentage of Children Infested	No. of School Departments
Nil	16
Under 1	2
1-1.99	9
2-2.99	4
3-3.99	1
4-4.99	2
5-9.99	3
10-20	2
Over 20	2

### (d) **Clothing and Footwear**

An ever increasing proportion of children are found to be wearing unsuitable shoes. Many choose pull-on styles that are too short and too loose at the heel, leading inevitably to cramping and distortion of the toes. Several children in the County Modern Schools complained of painful legs acquired by the sustained flexion necessary to keep their shoes on as they walk, and others move with a shuffling gait as their shoes flap at every step. Shoes are costly and should be chosen to give reasonable wear and be compatible with healthy growth: unfortunately in many cases this is not so either in the style or material selected.

At a time when many people tend to think there is no place or need for voluntary work in an all-providing Welfare State, we would again like to commend the work of the Scarborough Amicable Society. This body, which was founded in 1729 and is entirely dependent on voluntary subscriptions and donations, expended £303 in 1959 on the provision of boots and clothing. As in the previous year the Society concentrated its expenditure on the provision of clothing and footwear for Foundationers, the number of whom was increased from 14 to 16, and only £9 was spent on casual assistance.



(e) **Following-up**

The school nurses attend inspections in schools and follow-up cases in which assistance or advice is needed, and 127 home visits were made in this connection.

5. **TREATMENT OF DEFECTS.**

(a) **Minor Ailments**

Minor Ailments Clinics were again held daily at the School Clinic and weekly at Hinderwell and Northstead Schools. The conditions for which children attended are given in the following table:—

Conditions for which children attended M.A. Clinics	No. of first visits	Total Attendances
Scabies ....	8	18
Impetigo ....	2	4
Ringworm—Head ....	—	—
„ —Body ....	—	—
Uncleanliness (including Verminous Conditions) ....	37	44
Minor Injuries ....	230	418
External Eye Disease ....	40	165
Ear Discharge and Deafness ....	44	171
Nose and Throat ....	7	15
Vision ....	10	10
Heart and Circulation ....	3	4
Skin (Non-contagious) ....	194	492
Other conditions ....	135	347
TOTAL	710	1688

There was again a reduction in the number of children treated but total attendances increased, as shown in the table below:—

Year	No. of First Visits	Total Number of Attendances
1949	1571	3693
1950	1599	3828
1951	1339	3605
1952	1344	3542
1953	1256	3082
1954	1160	2998
1955	1003	3016
1956	1020	2647
1957	896	1808
1958	745	1460
1959	710	1688

(b) **Defective Vision**

Mr. J. Ellison, the ophthalmologist, continued to hold weekly sessions at the School Clinic, and all children at medical inspection who were considered to need treatment for defective vision or squint were

given the opportunity of attending his clinic. A summary of the work done at this clinic is given below, from which it will be seen that spectacles were prescribed for rather less than half of the children examined:

Number of sessions held by Ophthalmologist	....	47
Number of children examined	....	420
Total number of attendances at Eye Clinic	....	433
Number of children for whom spectacles were prescribed	....	196
Number of children recommended other forms of treatment	....	4

### (c) Diseases of Ear, Nose and Throat

Pupils found at medical inspection to require treatment for impaired hearing, enlarged or diseased tonsils or adenoids, are normally referred to their family doctors, or, with the consent of their family doctors, direct to the Ear, Nose and Throat Consultant at Scarborough Hospital. During the year 279 school children received operative treatment at Scarborough Hospital for diseases of the ear, adenoids and chronic tonsillitis and other nose and throat conditions, and 9 received other forms of non-operative treatment.

One school child was provided with a Medresco Hearing Aid through the hospital service in 1959, whilst 21 other children still at school were issued with aids in previous years.

Mr. Guy Thompson continued to visit the School Clinic each month primarily to see children with ear diseases, and 9 children attended his clinic.

### Audiometric Survey

Miss Ferris, the County Council's audiometric nurse, visited all primary schools in the Division for the purpose of testing the hearing of children with the pure-tone audiometer. In accordance with the policy outlined in my report last year she tested children in the 6—7 year age group at urban schools, whilst in the rural schools all children aged 6 years and over were tested. It is intended that in future the rural schools will be visited annually the same as the urban schools when only 6—7 year olds will be tested.

Altogether Miss Ferris tested 1,179 children, including a number referred specially by the school medical officers, and of these 56 failed the test. These failures were followed-up by the school medical officers and the parents given appropriate advice.

### (d) Orthopaedic

Twenty-two sessions were held by the orthopaedic surgeons at which 225 school children made 428 attendances. The orthopaedic nurse treated 111 pupils at the remedial exercises clinic; altogether she held 84 sessions and the total number of attendances made by these children was 415.



Twenty pupils from this Division were treated as in-patients at the Adela Shaw Orthopaedic Hospital, Kirbymoorside, during 1959, for the conditions shown in the following table:—

<i>Condition</i>				<i>No. of children treated</i>
Cerebral Palsy	....	....	....	3
Poliomyelitis	....	....	....	4
Bone Deformities	....	....	....	5
T.B. Spine	....	....	....	1
Perthes Disease	....	....	....	1
Asthma	....	....	....	1
Dislocated Cervical Spine	....	....	....	1
Septic Arthritis of Hip	....	....	....	1
Scheuermann's Disease	....	....	....	1
Baker's Cyst right	....	....	....	1
Torn Cartilage	....	....	....	1

#### (e) **Tuberculosis**

No case of tuberculosis in the age group 5—14 years was reported during the year.

#### (f) **Artificial Sunlight Treatment**

Attendances by school children at the Medical Baths for artificial sunlight treatment totalled 418, and 31 children completed one or more courses of treatment.

#### (g) **Dental Services**

There was no change in the dental staff during 1959, and in consequence it was again possible for adequate periodic inspections of school children in this area to be carried out. Particulars of the work undertaken by the school dental officers are given in Part IV of the Appendix.

### 6. **PHYSICAL EDUCATION.**

The following report on Physical Education in the Scarborough Division was prepared by Mr. Nock, the Divisional Education Officer:

“The work of Physical Education in the Division has received the continued interest and support both of the Specialists in Physical Education and of other teachers.

At the Residential Easter Course for Teachers held at the North Riding Training College demonstrations of physical education were given by five Scarborough Primary Schools, three rural Primary Schools and one Secondary Modern School. The unique facilities at the new High School for Boys have greatly contributed to the success of gymnastic and cricket courses for men.



Selected girls of Secondary School age attended a Residential Tennis Coaching Course held at Wrea Head College and the Yorkshire Lawn Tennis Club. The services of Mr. E. Lester, under the North Riding Cricket Coaching Scheme, have been appreciated by the High School for Boys.

One boy played cricket with distinction for the English Grammar Schools versus the Welsh Grammar Schools, four boys were chosen for the North Riding Grammar Schools cricket team and one boy for the Under 15 side. Once again the netball trophies in the North Riding rallies were won by Scarborough schools and Scarborough girls took part in the hockey rallies and tennis tournaments.

Swimming again played a large part in the schools' summer activities. The very inadequate facilities were used to the maximum in excellent weather conditions and learners were able to receive full tuition without the usual discomfort from cold east winds and numerous breaks for warming activities. Life Saving Classes were well attended and 209 pupils were successful in gaining Royal Life Saving Society awards, an increase of 60 on the previous year. Already two of the successful boys have figured in rescues during the year, one who rescued a North Riding girl after an accident when diving in the North Riding Championships and another who rescued a boy who was a non-swimmer and had fallen into the water when his raft overturned. But for the action of these boys the accidents might have proved fatal. One of the girls' schools was awarded the Rachel Brown Life Saving Shield as the school in the North East of England which had been most successful in obtaining Royal Life Saving Society Awards, and another girls' school was placed third in the competition for this award. The North Riding Swimming Championship was awarded to Scarborough and a Scarborough girl was chosen to swim for the Yorkshire County team. The use of the North Riding College bath has enabled a few pupils to swim during the winter but there is no doubt that there would be greater success to report if better facilities were available for indoor swimming during the winter months. Thanks are due to Mrs. Flax, Mr. Wilcock, all the R.L.S.S. Examiners and the teachers who have given liberally of their time and also to the Scarborough Schools Swimming Association for presenting a very well made two-tier diving board for use at the North Riding Training College bath.

The Scarborough Y.M.C.A. was the sponsoring authority for Duke of Edinburgh awards for boys in the Division during the time when the award scheme was still in its experimental period. This experimental period terminated in September and the schools then became directly responsible for the Bronze Award, with the assistance of a local liaison committee which is responsible for the higher awards. At the end of the experimental period 14 boys received the Bronze Award, 8 the Silver Award and 5 the Gold Award.

## 7. INFECTIOUS DISEASES.

Notifications of infectious diseases among children between the ages of 5—14 years (inclusive) in the Divisional Area were as follows:—

Measles	....	....	....	....	178
Whooping Cough	....	....	....	....	2
Scarlet Fever	....	....	....	....	30
Pneumonia	....	....	....	....	4
Dysentery	....	....	....	....	5
Food Poisoning	....	....	....	....	1

## 8. SCHOOL MILK AND MEALS.

The following table, supplied by the Divisional Education Officer, shows the position as on a day in the Autumn Term between 21st September and 2nd October, 1959:—

Percentage of children provided with meals in Rural Schools	....	....	....	....	65.22
Percentage of children provided with meals in Scarborough Schools	....	....	....	....	52.10
Percentage of children provided with milk in Primary Schools	....	....	....	....	93.25
Percentage of children provided with milk in Secondary Schools	....	....	....	....	64.21

## 9. CO-OPERATION WITH OTHER BODIES.

I am indebted to Mr. G. White, the local inspector of the N.S.P.C.C., for the following report on the work of his Branch during the year in connection with school children:—

“During 1959 there was an increase of cases reported for investigation or help and these were classified as follows:—

Neglect	....	....	....	27
Advice Sought	....	....	....	13
Assault or ill-treatment	....	....	....	6
Beyond Control	....	....	....	4
Exposure	....	....	....	1
Total				<u>51</u>

It is pleasing to note that only one of these cases had to be brought to the notice of the Court and this did not cause any break-up of the family.

Enquiries made for other Branches of the Society concerning families with children of school age numbered seven; these were chiefly on account of neglect to maintain.



Supervision visits in connection with the 51 cases numbered 231, and miscellaneous visits of enquiry also in connection with the case-work amounted to 183.

During the year it has been noted that there is an increase in the neglect of children by way of leaving them fastened in the home without adequate care, and in several cases there has been a definite danger during the colder months consequent on the lack of the provision of a fireguard.

The question of leaving children alone is a serious one and comes second in the list of cases where a child's mind can be seriously hurt by loneliness and fear, and is the cause of so much mental disturbance with the younger children."

## 10. NURSERY SCHOOLS.

Dr. Cameron prepared the following report:—

"The more experience one has of nursery schools the more one realises that, while a good nursery school can complement a good home, it can prove an untold blessing to a child with an inadequate background. This is especially true for psychological development, for one knows how important the foundations laid in these early years can be for subsequent mental health and stable character development. As there are many "only children" lacking opportunities for companionship, and many families living in small flats without gardens and with little space for vigorous play, there is an increasing demand for nursery school facilities from homes of all kinds.

As we still have only 45 places at Childhaven a rigorous process of selection is necessary, and as the waiting list is considerably longer than this, many children never do achieve admission. To deny a child admission to a nursery school does not improve the quality of his home care: it may merely substitute some less adequate, sometimes quite casual "minding" for the security and orderly freedom of the school. I feel sure that an increase in nursery school places could prove an important preventive measure in reducing the number of children who subsequently grow into problem children or troublesome adolescents.

In addition to Childhaven Nursery School, a nursery class exists at Friarage School where children are admitted from 3 years of age.

At both of these establishments the children are inspected twice yearly by the school medical officers. Close co-operation between the parents and children is maintained and this, with constant vigilance on the part of the staff, helps to control the spread of infection."

## 11. HANDICAPPED PUPILS.

Under the Scheme of Divisional Administration it is the duty of the Divisional Executive to report to the County Council all cases of children who require special educational treatment, but the placement in



special schools of these children is the responsibility of the Local Education Authority. During the year 11 children were ascertained as Handicapped Pupils, viz:—

Educationally Subnormal	....	5
Physically Handicapped	....	6

Sixteen handicapped pupils from the Division were maintained by the Local Education Authority at special residential schools, as follows:

Name of School	Boys	Girls
<b>BLIND AND PARTIALLY SIGHTED</b>		
Royal Normal College for the Blind, Rowton Castle, Nr. Shrewsbury	—	1
Exhall Grange Special School, Coventry	1	—
<b>DEAF AND PARTIALLY DEAF</b>		
Yorkshire Residential School for the Deaf, Doncaster	—	1
Mary Hare Grammar School, Newbury	—	1
<b>EDUCATIONALLY SUBNORMAL</b>		
Brompton Hall School	3	—
<b>PHYSICALLY HANDICAPPED</b>		
Welburn Hall School	2	5
Holly Bank Special School, Huddersfield	—	1
<b>SPEECH DEFECT</b>		
Moor House School, Oxted, Surrey	1	—

The Special Class at No. 9 Seamer Road provides for the needs of most of the educationally subnormal children in the Division. It can accommodate 36 children, and all places were taken throughout the year. Indeed there has always been a waiting list for admission. Altogether 45 children attended during 1959; of these 11 were admitted during the course of the year, and 9 were discharged, 6 having reached school leaving age, 2 left the district, and 1 was withdrawn as ineducable.

## 12. SECTION 57, EDUCATION ACT, 1944.

No child was reported under Section 57(3) of the Education Act, 1944, as ineducable, but 7 were reported under Section 57(5) of the Act as requiring supervision after leaving school.

## 13. SPEECH THERAPY.

After a lapse of more than a year speech therapy was resumed with the appointment of Miss A. Mawson in September. Towards the end of the year she held sessions on one day per week at Whitby, otherwise she was able to devote the whole of her time to the treatment of children

in the Scarborough Division. The following is a statistical summary of the work carried out by Miss Mawson:—

Total number of treatments	....	....	680
Interviews with parents	....	....	100
New cases admitted	....	....	40
Old cases re-admitted	....	....	35
Total number of cases treated	....	....	75
Cases discharged and withdrawn	....	....	8
Cases remaining under treatment	....	....	67

**The reasons for cessation of treatment**

	Boys	Girls	Total
Discharged adjusted	4	1	5
Discharged conditionally			
Left district	3	—	3
Total	7	1	8
Remaining under treatment	51	16	67
Total treated	58	17	75

**Defects from which children suffered**

	Boys	Girls	Total
Stammer	21	2	23
Dyslalia	24	4	28
Sigmatism	6	6	12
Cleft Palate	2	1	3
Cerebral Palsy	1	1	2
Mongolism and Retardation	2	—	2
Rhinophonia	2	—	2
Deaf	—	1	1
Hard of Hearing	—	2	2
Total	58	17	75

**14. CHILD GUIDANCE.**

The following report on the work of the Child Guidance Clinic in Scarborough was prepared by Miss E. M. Milbanke, the Authority’s Educational Psychologist:—

“Throughout the year Dr. C. H. Neville-Smith, Consultant in Child Psychiatry to the Leeds Regional Hospital Board, held clinics at the School Clinic, Friars Way, on Wednesdays, and he was able to fit in some extra sessions on Tuesday mornings. Mr. J. G. Haggett remained the only psychiatric social worker, but Mr. P. F. Woodman, educational psychologist, joined the staff in July and shared that aspect of the work with Miss Milbanke.

Altogether 100 psychiatric sessions were held, and children from other areas, mainly Whitby and Malton, were seen as well, but the figures given here apply only to the Scarborough Division.



### **Children seen by the Psychiatrist**

	Boys	Girls
Consultation only	8	2
Supportive interviews	5	3
Regular treatment	4	1
Seen at request of Magistrates for court report	3	2
	<hr/>	
	Total 28	

Some problems could be eased substantially in one or two interviews, and supportive treatment — seeing the child at intervals of about six weeks — seemed sometimes the most effective way of helping. More often it was undertaken as the only feasible course, when the psychiatrist felt that the child needed to be seen once or twice a week for a period of at least six months. The facilities were adequate for an advisory service, but no child could be seen more than once a week and very few as frequently as that. At the end of the year 5 children who had been seen by the psychiatrist were awaiting vacancies for regular treatment, and 9 were awaiting their initial examination. This means that from Scarborough alone was work for twice as many sessions, yet the indications at the end of the year were that less rather than more time would become available.”

#### **15. CHILD DELINQUENTS.**

Eighty-three medical reports were submitted to the Magistrates concerning children who appeared before the Juvenile Courts.

#### **16. EMPLOYMENT OF SCHOOL CHILDREN.**

Forty-eight children were medically examined under the conditions of the bye-laws relating to the employment of children, and all but one were considered fit for their proposed employment without detriment to their health.

#### **17. MEDICAL EXAMINATION OF ENTRANTS TO COURSES OF TRAINING FOR TEACHERS.**

Under the provisions of Ministry of Education Circular 249, 59 entrants to courses of training for teachers were medically examined.

#### **18. STAFF MEDICAL EXAMINATIONS.**

For the purpose of determining their fitness for employment or fitness for inclusion in the County Council's Superannuation Scheme, 99 persons, who had been appointed to posts under the Education Authority, were medically examined during the year by the school medical officers.

**MEDICAL INSPECTION AND TREATMENT****Year Ended 31st December, 1959.****PART I — MEDICAL INSPECTION OF PUPILS ATTENDING  
MAINTAINED PRIMARY AND SECONDARY SCHOOLS  
(INCLUDING NURSERY SCHOOLS)****TABLE A — PERIODIC MEDICAL INSPECTIONS**

Age Groups Inspected (By year of birth)	No. of Pupils Inspected	Physical Condition of Pupils Inspected			
		SATISFACTORY		UNSATISFACTORY	
		No.	% of Col. 2	No.	% of Col. 2
		(3)	(4)	(5)	(6)
1955 and later	89	85	95.51	4	4.49
1954	302	300	99.34	2	0.66
1953	383	381	99.48	2	0.52
1952	269	266	98.88	3	1.12
1951	329	327	99.39	2	0.61
1950	64	63	98.44	1	1.56
1949	327	323	98.78	4	1.22
1948	370	362	97.84	8	2.16
1947	220	212	96.36	8	3.64
1946	514	499	97.08	15	2.92
1945	528	505	95.64	23	4.36
1944 and earlier	885	857	96.84	28	3.16
<b>TOTAL</b>	<b>4280</b>	<b>4180</b>	<b>97.66</b>	<b>100</b>	<b>2.34</b>

**TABLE B — PUPILS FOUND TO REQUIRE TREATMENT AT  
PERIODIC MEDICAL INSPECTIONS**  
(excluding Dental Diseases and Infestation with Vermin)

Age Groups Inspected (By year of birth) (1)	For defective vision (excluding squint) (2)	For any of the other conditions recorded in Part II (3)	Total individual pupils (4)
1955 and later	—	7	7
1954	4	53	57
1953	9	48	56
1952	6	44	50
1951	10	40	50
1950	4	14	17
1949	20	42	60
1948	16	55	65
1947	10	23	31
1946	25	54	75
1945	24	44	65
1944 and earlier	53	82	131
<b>TOTAL</b>	<b>181</b>	<b>506</b>	<b>664</b>



# TABLE C — OTHER INSPECTIONS

Number of Special Inspections	552
Number of Re-inspections	935
Total	<u>1487</u>

# TABLE D — INFESTATION WITH VERMIN

(a) Total number of individual examinations of pupils in schools by school nurses or other authorised persons	21,892
(b) Total number of individual pupils found to be infested	351
(c) Number of individual pupils in respect of whom cleansing notices were issued (Section 54 (2), Education Act, 1944)	—
(d) Number of individual pupils in respect of whom cleansing orders were issued (Section 54 (3), Education Act, 1944)	—

**PART II — DEFECTS FOUND BY MEDICAL INSPECTION  
DURING THE YEAR.**

**TABLE A — PERIODIC INSPECTION**

DEFECT OR DISEASE	PERIODIC INSPECTIONS							
	Entrants		Leavers		Others		Total	
	(T)	(O)	(T)	(O)	(T)	(O)	(T)	(O)
IN	19	6	42	23	81	13	142	42
ES								
a) Vision	13	29	77	154	91	148	181	331
b) Squint	8	11	1	6	15	18	24	35
c) Other	3	4	2	4	6	8	11	16
RS								
a) Hearing	—	20	2	18	6	30	8	68
b) Otitis Media	7	27	3	11	5	25	15	63
c) Other	2	2	1	1	—	3	3	6
se and Throat	36	76	8	28	33	71	77	175
eech	14	27	1	9	14	22	29	58
mphatic Glands	—	34	—	5	1	17	1	56
art	2	6	7	17	13	15	22	38
ngs	2	7	3	31	7	25	12	63
velopmental								
a) Hernia	1	—	—	2	2	5	3	7
b) Other	2	5	7	12	10	23	19	40
hopaedic								
a) Posture	1	3	2	32	3	25	6	60
b) Feet	4	30	15	81	23	41	42	152
c) Other	2	23	7	21	9	25	18	69
vous System								
a) Epilepsy	—	2	1	3	3	6	4	11
b) Other	—	1	—	6	2	4	2	11
ychological								
a) Development	—	6	—	20	—	57	—	83
b) Stability	1	30	3	29	10	95	14	154
omen	4	7	2	7	3	12	9	26
er	10	1	23	12	33	15	66	28

(T) — Number of children found to require treatment.

(O) — Number of children found to require observation.



TABLE B — SPECIAL INSPECTIONS

DEFECT OR DISEASE	SPECIAL INSPECTIONS	
	Pupils requiring Treatment	Pupils requiring Observation
SKIN	84	1
EYES		
(a) Vision	44	4
(b) Squint	3	—
(c) Other	24	1
EARS		
(a) Hearing	10	20
(b) Otitis Media	17	—
(c) Other	19	—
NOSE AND THROAT	22	1
SPEECH	7	—
LYMPHATIC GLANDS	2	—
HEART	5	—
LUNGS	3	1
DEVELOPMENTAL		
(a) Hernia	—	—
(b) Other	2	—
ORTHOPAEDIC		
(a) Posture	—	1
(b) Feet	21	—
(c) Other	17	1
NERVOUS SYSTEM		
(a) Epilepsy	—	1
(b) Other	1	—
PSYCHOLOGICAL		
(a) Development	9	6
(b) Stability	3	1
ABDOMEN	2	2
OTHER	91	—

**PART III — TREATMENT OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS (INCLUDING NURSERY SCHOOLS).**

**TABLE A — EYE DISEASES, DEFECTIVE VISION & SQUINT**

	Number of cases known to have been dealt with
External and other, excluding errors of refraction and squint	40
Errors of refraction (including squint)	420
TOTAL	460
Number of pupils for whom spectacles were prescribed	196

**TABLE B — DISEASES AND DEFECTS OF EAR, NOSE AND THROAT**

	Number of cases known to have been dealt with
Received operative treatment—	
(a) for diseases of the ear	3
(b) for adenoids and chronic tonsillitis	272
(c) for other nose and throat conditions	4
Received other forms of treatment	60
TOTAL	339
Total number of pupils in schools who are known to have been provided with hearing aids—	
(a) in 1959	1
(b) in previous years	21

**TABLE C — ORTHOPAEDIC AND POSTURAL DEFECTS**

	Number of cases known to have been treated
(a) Pupils treated at clinics or out-patients departments	225
(b) Pupils treated at school for postural defects	—
TOTAL	225

TABLE D — DISEASES OF THE SKIN  
(excluding uncleanness, for which see Table D of Part I)

						Number of cases known to have been treated
Ringworm—(a) Scalp	....	....	....	....		—
(b) Body	....	....	....	....		—
Scabies	....	....	....	....		8
Impetigo	....	....	....	....		2
Other skin diseases	....	....	....	....		194
TOTAL					....	204

TABLE E — CHILD GUIDANCE TREATMENT

						Number of cases known to have been treated
Pupils treated at Child Guidance Clinics	....	....	....	....		28

TABLE F — SPEECH THERAPY

						Number of cases known to have been treated
Pupils treated by speech therapists	....	....	....	....		75

TABLE G — OTHER TREATMENT GIVEN

						Number of cases known to have been dealt with
(a) Pupils with minor ailments	....	....	....	....		368
(b) Pupils who received convalescent treatment under School Health Service arrangements	....	....	....	....		—
(c) Pupils who received B.C.G. vaccination (by Chest Physician)	....	....	....	....		4
(d) Pupils who completed courses of U.V.R. treatment	....	....	....	....		31
TOTAL					....	403



# PART IV — DENTAL INSPECTION AND TREATMENT

## CARRIED OUT BY THE AUTHORITY

(1)	Number of pupils inspected by the Authority's Dental Officers:—					
	(a)	At Periodic Inspections	....	8608	} Total (1)	.... 8893
	(b)	As Specials	....	285		
(2)	Number found to require treatment					.... 5759
(3)	Number offered treatment					.... 3632
(4)	Number actually treated					.... 1727
(5)	Number of attendances made by pupils for treatment, including those recorded at 11(h)					.... 5273
(6)	Half days devoted to:					
	(a)	Periodic (School) Inspection	....	88½	} Total (6)	.... 761½
	(b)	Treatment	....	673		
(7)	Fillings:					
	(a)	Permanent Teeth	....	3385	} Total (7)	.... 3881
	(b)	Temporary Teeth	....	496		
(8)	Number of Teeth filled:					
	(a)	Permanent Teeth	....	2965	} Total (8)	.... 3369
	(b)	Temporary Teeth	....	404		
(9)	Extractions:					
	(a)	Permanent Teeth	....	307	} Total (9)	.... 930
	(b)	Temporary Teeth	....	623		
(10)	Administration of general anaesthetics for extraction					.... 448
(11)	Orthodontics:					
	(a)	Cases commenced during the year	....	....	....	20
	(b)	Cases brought forward from previous year	....	....	....	26
	(c)	Cases completed during the year	....	....	....	7
	(d)	Cases discontinued during the year	....	....	....	15
	(e)	Pupils treated with appliances	....	....	....	46
	(f)	Removable appliances fitted	....	....	....	36
	(g)	Fixed appliances fitted	....	....	....	—
	(h)	Total attendances	....	....	....	395
(12)	Number of pupils supplied with artificial teeth					.... 34
(13)	Other operations:					
	(a)	Permanent Teeth	....	1164	} Total (13)	.... 1804
	(b)	Temporary Teeth	....	640		



